CENTER OF EXCELLENCE IN JOINT REPLACEMENT

In partnership with key opinion leaders and industry professionals, SRC developed the Center of Excellence in Joint Replacement Surgery (COEJR) program. The COEJR program identifies surgeons and facilities worldwide performing joint replacement surgery and achieving defined standards for patient safety and care quality.

PROGRAM REQUIREMENTS

1. INSTITUTIONAL COMMITMENT TO EXCELLENCE

The applicant facility is committed to excellence in joint replacement surgery and has credentialing and privileging guidelines in joint replacement surgery.

2. SURGICAL EXPERIENCE

The applicant facility performs at least 200 qualifying joint replacement surgery procedures annually. Each applicant surgeon performs at least 125 procedures annually and has served as the primary surgeon for at least 200 joint replacement procedures in their lifetime. Applicants perform each surgical procedure in a standardized manner and use a template for operative note dictation to ensure proper data collection for surgical procedures.

3. PHYSICIAN PROGRAM DIRECTOR

The applicant facility must appoint a Physician Program Director for the COEJR program who is accredited or in the process of becoming accredited.

4. CONSULTATIVE SERVICES

The applicant facility must have a full complement of consultative services required for the routine and intensive care of joint replacement surgery patients and their potential complications including: anesthesiologist or CRNA, ACLA-certified physician or team, general surgeon, critical care specialist, hospitalist, cardiologist or pulmonologist, general surgeon, vascular surgeon, radiologist, infectious disease specialist, occupational therapist, physical therapist or physiatrist, pain management and wound care specialist.

5. EQUIPMENT AND INSTRUMENTS

The applicant facility must maintain a full line of equipment and surgical instruments to provide perioperative care for joint replacement surgery patients and have documented training for appropriate staff in the safe operation of this equipment.

6. SURGEON DEDICATION AND QUALIFIED CALL COVERAGE

Each applicant surgeon has privileges in joint replacement surgery at the applicant facility, is boardcertified or an active candidate for board certification in joint replacement surgery and has qualified call coverage. Each applicant completes at least 24 hours of CME focused on joint replacement surgery every three years.

7. CLINICAL PATHWAYS AND STANDARDIZED OPERATING PROCEDURES

Applicants formally develop and implement all required clinical pathways that facilitate the standardization of perioperative care for joint replacement surgery procedures. Clinical pathways are supported by standardized preoperative, postoperative and discharge physician order sets.

8. SURGICAL TEAM AND SUPPORT STAFF

For each department seeking accreditation, the facility is required to have a designated program coordinator, along with nurses, physician extenders, and a consultative team. This team must be committed to providing high-quality patient care and participate in ongoing, regularly scheduled in-service education sessions to uphold accreditation standards.

9. PATIENT EDUCATION

The facility and each applicant surgeon provide all joint replacement surgery patients with preoperative patient education, have a process for obtaining informed surgical consent and selecting procedures that are most appropriate for each patient's condition.

10. CONTINUOUS QUALITY ASSESSMENT

All applicants must collect prospective outcomes data on all patients who undergo joint replacement surgery procedures in SRC's Outcomes Database (or a similar qualifying database).

This is a summarized list of program requirements which is subject to change. For additional information, please contact SRC by emailing <u>businessdevelopment@surgicalreview.org</u> or calling 919.438.2156.



OINT REPLACEMENT