

Overlapping Surgery from the Patient's Perspective: A Qualitative Study

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[Supplemental Video](#)

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Overlapping operations are defined by the American College of Surgeons as when a single surgeon oversees more than one operating room but is present for all “critical” portions of the case and is immediately available if complications arise. They are common practice in a variety of surgical specialties across hospitals throughout the country. The practice offers financial gains to the institution by packing the schedule with more patients and increases the opportunity for trainees to learn. However, the 2015 Boston Globe article, “Clash in the Name of Care”, sparked public backlash towards the practice of running multiple operating rooms at the same time. The article exposed the lack of patient awareness and consent for being in an overlapping case and played into the public’s fear of complications (one patient woke up from surgery paralyzed).

Since then, numerous groups have published studies and opinion pieces, both attacking and defending the practice. Most surveys published thus far explore the general public’s perception of overlapping surgeries and show their varying levels of support for the practice. Opinions aside, informed consent for overlapping surgeries is required as in accordance with the four basic principles of healthcare ethics: autonomy, justice, beneficence, and non-maleficence.

At the present time, the American College of Surgeons believe overlapping surgeries to be appropriate if certain precautions are met, and the patient gives their informed consent. Since methods in obtaining informed consent vary amongst providers, it is unclear how educated each patient becomes on overlapping operations before signing the consent form. Additionally, there only exists data on the general public’s perceptions.

Further study on patients’ perspectives of overlapping surgery needs to be done with a special focus on patients who received informed consent regarding it. Through semi-structure interviews, we seek to obtain a perspective from a population that has had little input on the discussion of overlapping operations thus far, despite their direct involvement in the hot-button topic. Ultimately, we hope a better understanding of their experience through their informed consent process and post-surgical recovery will serve to improve surgeon-patient education methods and hospital policies regarding overlapping surgeries.

Learning Objectives

1. Discuss the ethical challenges of overlapping surgeries from the institution, provider, and patients’ perspectives.
2. Examine the informed consent process with a focus on where patient education is lacking