



Orthopaedic Administration Update: Navigating a Time of Change

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Heraclitus, the Greek philosopher, has been quoted as saying “change is the only constant in life.” It seems like there is no truer place for that saying than in American healthcare and as such, we continue to see an enormous amount of change at Penn Medicine and in the Department of Orthopaedics. That change takes on many different shapes and sizes, but one thing for sure is that it is constant.

One of the largest changes to impact the American healthcare delivery system this year happened when Medicare moved Total Knee Arthroplasty (TKA) off of the “inpatient only list,” meaning that TKAs could be done and reimbursed as an outpatient procedure. Long gone are the days of patients staying in the hospital for a week for knee replacements. In fact, patients at Pennsylvania Hospital and Presbyterian Medical Center routinely are just staying one or two nights after surgery. The pressure placed on the healthcare system by Medicare was soon followed by other insurance providers. This pressure challenges us to think about our patient selection criteria and our systems of care to help support the patients and deliver care within the constraints of payment. Working closely with nursing colleagues on early mobilization and with physical therapy on how to safely discharge a patient are now regular occurrences within the Adult Reconstruction division. As these changes and pressures happen, it forces us to relook at how we deliver care.

We also have seen a tremendous shift from society in reaction to the opioid epidemic in the United States. It has forced us to look closely as individuals and as a department on our opioid prescribing habits. Both Dr. Levin and I are so proud of the way that the physicians, advanced practice providers, residents, and fellows have embraced this work. Over the last 18 months, the department has reduced opioid prescribing by more than 46%. That prescribing represents a significant reduction in the number of pills that are being prescribed into our communities and demonstrates our department’s ability to continue to deliver care safely and effectively in this changing environment.

Technology represents another aspect of change in both our personal and professional lives, and we feel that here in the department. We recently started a clinical research study in collaboration with an implant vendor and Apple which is designed to capture patient data post-operatively, while at the same time delivering patient education to them via their iWatch. What seemed futuristic just a decade ago is now happening right here in the department. Whether it is our electronic health record or text alerts that a hip fracture patient has arrived in the emergency room, we will continue to adapt to changes in technology.

We also had two new clinical faculty members join the Department in the past year. Dr. Christopher Travers joined the Adult Reconstruction division in September of 2018 after completing a residency at Tufts and then a fellowship in Adult Reconstruction here in Penn Orthopaedics. His practice is focused on all forms of adult reconstruction. He is seeing patients at Pennsylvania Hospital and in Cherry Hill, NJ and has quickly built a busy practice. Dr Stanley Michael also joined the faculty this past year joining Dr Kevin McHale down at Cape Regional Hospital. He is also a member of the Adult Reconstruction division and joined us after practicing at Temple University for many years. Welcome to both of them!

Each of these examples represent changes in our world. Regardless of the size of change though, each one requires us to look at what we are doing here in the department. It forces us to change and navigate through the stability we seek. The fortunate thing for the Department of Orthopaedics is that we have a tremendous team of professionals working side by side with each other. Physicians, administrators, nurses, physician assistants, residents, fellows all working together is what enables us to navigate this change. Your dedication to patient care and your desire to help Penn Medicine and Penn Orthopaedics be the very best is what makes us strong. Thank you for all you do!