



THE ASSISTANT SECRETARY OF DEFENSE

WASHINGTON, DC 20301-1200

OCT 08 1996

**MEMORANDUM FOR:**  
SURGEON GENERAL OF THE ARMY  
SURGEON GENERAL OF THE NAVY  
SURGEON GENERAL OF THE AIR FORCE

**SUBJECT:** Clinical Reengineering: Policy for Same-Day Surgery

The Civilian External Peer Review Program (CEPRP) reviewed 9,897 patients who underwent either open or laparoscopic cholecystectomy at 95 military medical treatment facilities (MTF). The review was done at the request of the Department of Defense (DoD) because of surgical community concerns about the rapidity with which the laparoscopic approach was being introduced.

The review found that almost 90% of the patients undergoing cholecystectomy in MTFs had risk-adjusted clinical outcomes that were uniformly good. However, there was great variation in the risk-adjusted resource use in treating these patients across the MTFs. The largest contributor to this variation was MTF policy, not clinical practice.

MTFs that had policies in place for same day surgeries consumed fewer resources and enjoyed the same, if not better, clinical outcomes. If all of the MTFs which had performed cholecystectomies during the study period had same day surgery policies and made minor changes to clinical practice as outlined in the review, DoD could have avoided spending an estimated \$7M.

Based on the results of the study, I request that you implement same day surgery policy for laparoscopic cholecystectomy and other appropriate procedures as soon as possible.

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