Your efficiency partner

VISIONAIRE Cutting Guides are focused on helping meet your efficiency goals for total knee arthroplasty. Cutting Guides incorporate surgeon specific preoperative planning to aid in determining implant size and patient specific alignment and rotation.

Reducing surgical steps
When integrating the Cutting Guides into standard protocol you are eliminating 20 surgical steps, which reduces the number of instruments needed for a procedure. Studies have shown contamination can occur in 15% of trays opened in an operating room in as little as one hour of open air exposure. By reducing instrumentation with the Cutting Guides, you reduce the number of trays needed for a procedure.

Reducing surgical time
Through preoperative planning and instrument reduction, VISIONAIRE Cutting Guides have shown to provide a 24% reduction in OR time. An analysis of operative time shows at each fifteen-minute increase over sixty minutes was associated with a 9% increase in deep surgical site infection risk.

VISIONAIRE CJR Bundle Accounts
Data shown in Figure 1 represents 2015 VISIONAIRE CJR (approximately 2,000 cases or 7% of total VISIONAIRE cases) vs. Non-VISIONAIRE CJR accounts. While this data set does not prove a correlation between the use of VISIONAIRE and the reduction of bundle costs, the data set does indicate that high volume (≥25/yr.) VISIONAIRE CJR accounts have lower total episode costs, lower re-hospitalizations and lower post-acute care costs.
**Potential for reduction in total Episode Payments**

- Accounts performing 25 VISIONAIRE cases had an episode payment 12% below the CJR average
- Accounts performing 50 VISIONAIRE cases had an episode payment 20% below the CJR average
- Accounts performing at least 100 VISIONAIRE cases had an episode payment 29% below the CJR average

**Potential for lower re-hospitalizations**

- Accounts performing 25 VISIONAIRE cases had a readmission rate 15% below the CJR average
- Accounts performing 50 VISIONAIRE cases had a readmission rate 20% below the CJR average
- Accounts performing at least 100 VISIONAIRE cases had a readmission rate 38% below the CJR average

**Potential for reduction in Post Acute Care costs**

- Accounts performing 25 VISIONAIRE cases charged 14% less than the CJR average on Post Acute Care
- Accounts performing 50 VISIONAIRE cases charged 28% less than the CJR average on Post Acute Care
- Accounts performing at least 100 VISIONAIRE cases charged 45% less than the CJR average on Post Acute Care

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**Figure 2. Graphical View of Cost Comparison of CJR Accounts with and without VISIONAIRE Cutting Guides**

**Episode Payment**

- % Improvement Total VIS vs CJR:
  - 21%
  - 19%
  - 20%
  - 25%
  - 30%

- % Improvement 25 VIS vs CJR:
  - 15%
  - 12%
  - 14%
  - 20%

- % Improvement 50 VIS vs CJR:
  - 20%
  - 20%
  - 28%

- % Improvement ≥100 VIS vs CJR:
  - 38%
  - 29%
  - 45%

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**Bundling Opportunities in the CJR/BPCI**

Smith & Nephew proprietary technologies such as VISIONAIRE and JOURNEY™ II are designed to drive efficiencies and lower costs throughout the episode of care. Smith & Nephew is building opportunities with surgeons and hospitals to provide risk-sharing agreements. If your surgeons use PICO™ Single Use Negative Pressure Wound Therapy and ACTICOAT™ Flex 7 Antimicrobial Barrier Dressings on a closed surgical incision, after using a Smith & Nephew primary total hip or knee system, the cost of the Smith & Nephew implant, PICO and ACTICOAT, will be reimbursed if, during the first 90 days post-procedure, there is a surgical site infection or implant failure.

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