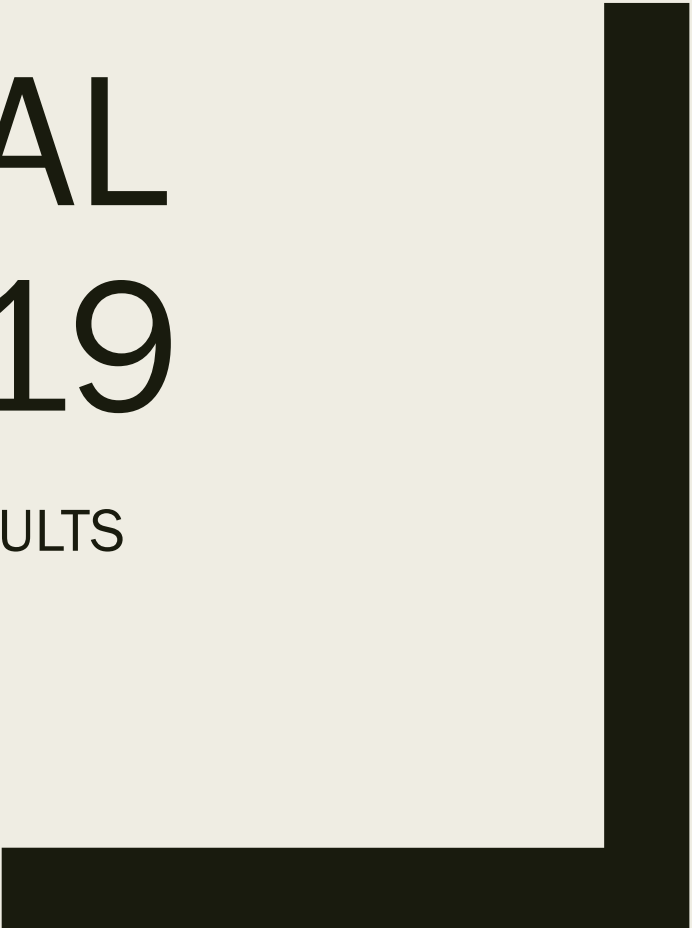


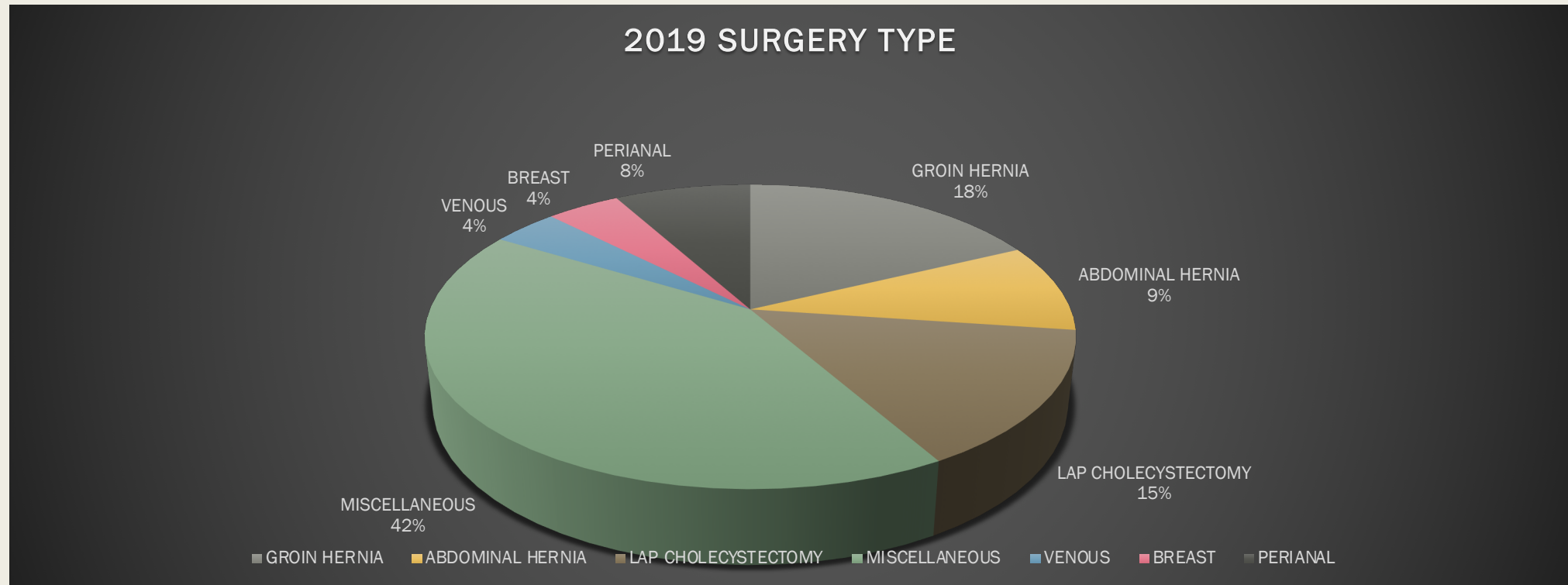
AAH SURGICAL RESULTS 2019

INDIVIDUAL MEDICAL SPECIALIST RESULTS
PRACTICE: DR.P.R.FA SI OEN

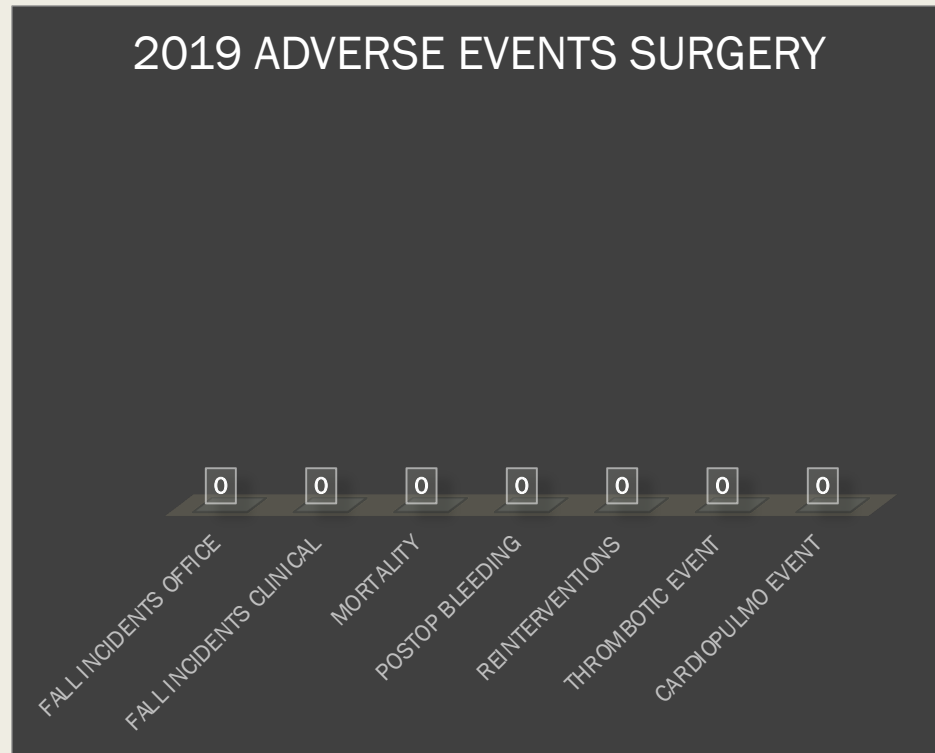


SURGICAL PALET 2019

461 PROCEDURES



ADVERSE EVENTS IN SURGERY 2019 OVERALL



- FALL INCIDENTS N=0 (0.0%)
- MORTALITY (0%)
- POSTOP BLEEDING N=0 (0%)
- REINTERVENTIONS N=0 (0%)
- THROMBOTIC EVENTS N=0 (0%)
- CARDIAC EVENTS N=0 (0%)

BENCHMARK DATA

ADVERSE EVENTS SURGERY OVERALL

PRACTICE FA SI OEN 2019

- FALL INCIDENTS N=0 (0%)
- MORTALITY (0%)
- POSTOP BLEEDING N=0 (0%)
- THROMBOTIC EVENTS N=0 (0%)
- CARDIAC EVENTS N=0 (0%)

COMPARISON INTERNATIONAL DATA

- **3.3-11.5*** BOULDIN ET AL J PATIENT SAFETY 2013 MAR 9(1)
- **0.17-1.7%** HEENEY AT AL SURGION 2014 JUN 12(3):121-4
- **0-03-10%** KAUSHIK ET AL J MINIM SURG 2010 JUL-SEPT
- **2-2.1%** SCHAEPKENS VAN RIEMST SURG ENDOSC 2002 JAN;16(1)
- **0-27-1.1%** KUMAR ET AL J GEN INTERN MED 2001 AUG; 16(8)

*FALL INCIDENCE PER 1000 PATIENT DAYS

IN DEPTH ANALYSIS

TWO MOST PERFORMED SURGERIES

- GALLBLADDER SURGERY
- INGUINAL HERNIA SURGERY

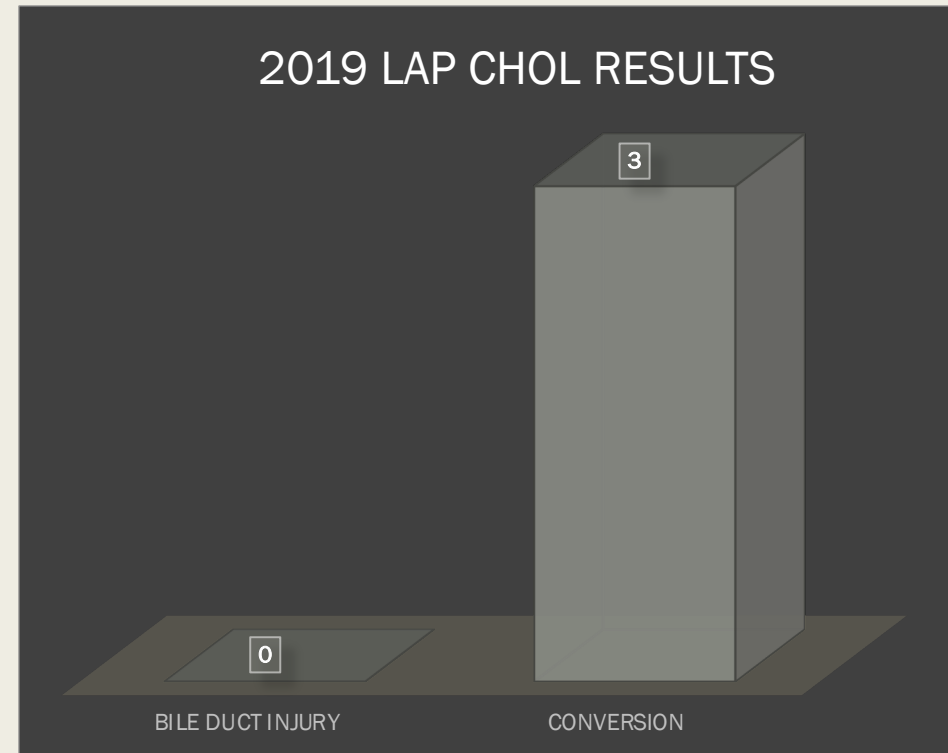
GALBLADDER SURGERY

- LAPAROSCOPIC PERFORMED SURGERY 100%
- CONVERSION TO OPEN SURGERY N=3 (4.4%)
- BILE DUCT INJURY/LEAK N=0 (0%)
- POSTOP BLEEDING N=0 (0%)
- REINTERVENTIONS N=0 (0%)

LAPAROSCOPIC=MINIMAL INVASIVE 'WITH SMALL CUTS AND CAMERA'

CONVERSION=STARTING WITH CAMERA BUT GOING TO REGULAR OPEN SURGERY DURING THE OPERATION FOR TECHNICAL OR SAFETY REASONS

*All conversions were elective conversions by protocol due to chronic infectious mass of the gallbladder with obstructed critical view of safety



BENCHMARK DATA

GALBLADDER SURGERY

PRACTICE FA SI OEN 2019

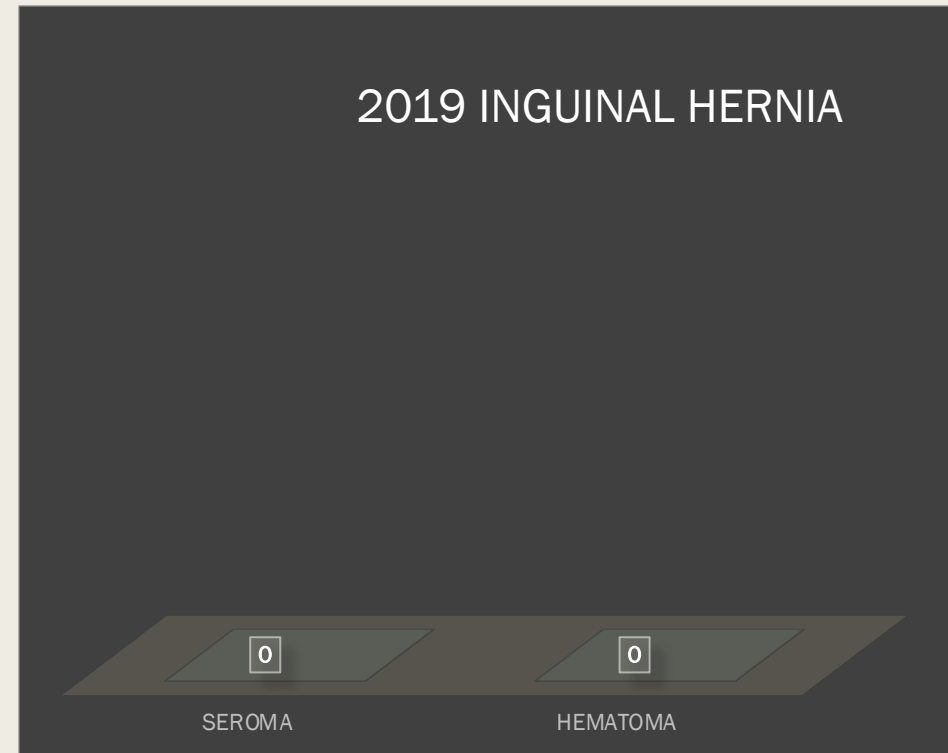
- LAPAROSCOPIC SURGERY 100%
- CONV TO OPEN SURG N=3 (4.4%)
- BILE DUCT INJURY/LEAK N=0 (0%)
- POSTOP BLEEDING N=0 (0%)
- MORTALITY N=0 (0%)

COMPARISON INTERNATIONAL DATA

- 75% LIVINGSTON ET AL AM J SURG 2004; SEPT 188(3)
- 5-10% LIVINGSTON ET AL AM J SURG 2004; SEPT 188(3)
- 0.1-2% RENZ ET AL VISC MED 2017 JUN:33(3)
- 0.03-10% KAUSHIK ET AL J MINIM SURG 2010 JUL-SEPT
- 0-0.3% RENZ ET AL VISC MED 2017 JUN:33(3)

INGUINAL HERNIA SURGERY

- MORTALITY N=0 (0%)
- POSTOPERATIVE BLEEDING N=0 (0%)
- REINTERVENTIONS N=0 (0%)
- LAPAROSCOPIC INCL RATE IF ELIGIBLE 100%
- CLINICAL SEROMA N=0 (0%)
- CLINICAL HEMATOMA N=0 (0%)
- OPER FOR RECUR HERNIA N=4 (4.8%)



BENCHMARK DATA

INGUINAL HERNIA SURGERY

PRACTICE FA SI OEN 2019

- MORTALITY N=0 (0%)
- POSTOP BLEEDING N=0 (0%)
- CLINICAL SEROMA N=0 (0%)
- CLINICAL HEMATOMA N=0 (0%)
- OPER FOR RECUR HERNIA N=4 (4.8%)

COMPARISON INTERNATIONAL DATA

- 1.4-4.2 SMR* NILSSON ET AL ANN SURG 2007 APR;245
- 1.12-3.91% KOCKERLING SURG ENDOSC 2016; 30
- 0.5-12.2% KOCKERLING SURG ENDOSC 2018; 325
- 0.5-12.2% KOCKERLING SURG ENDOSC 2018; 325
- 6.06-13% ANDRESEN ET AL SURG INNOV 2016;23:142-7

*STANDARD MORTALITY RATE = (RATIO OF NORMAL BACKGROUND POPULATION MORTALITY)