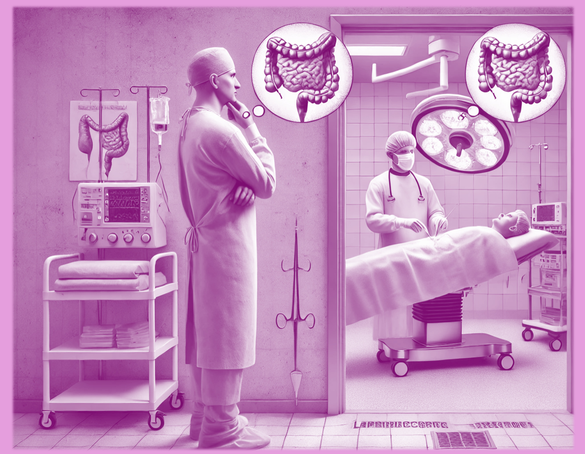
INSTITUTION-LEVEL FRAMEWORK TO ESTIMATE THE IMPACT OF BMI ON OPERATIVE DECISION MAKING IN PATIENTS UNDERGOING COLORECTAL SURGERY IN NOVA SCOTIA

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Peri-operative decision making

What factors impact it?

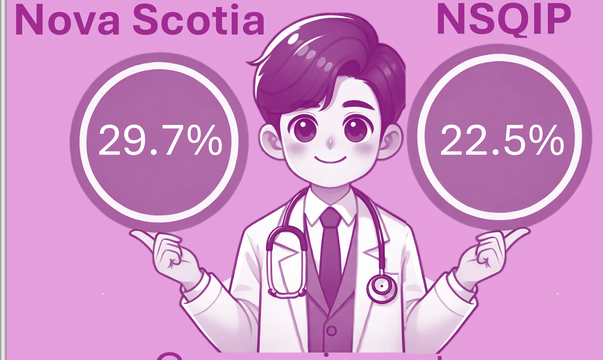
body habitus?
co-morbidities
provider preferences



Laparoscopic ⟹ Open

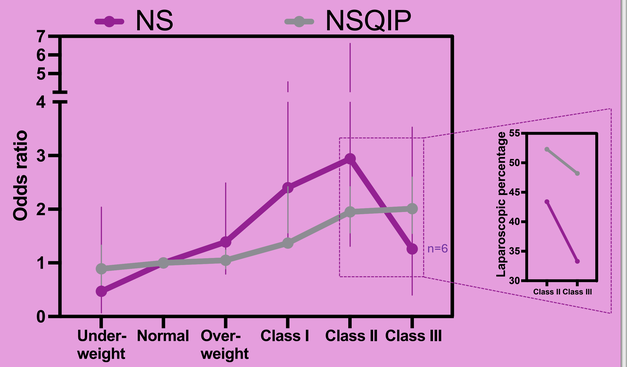
Unplanned conversion of laparoscopic surgeries to open surgeries is a **principal component** of peri-operative decision making.

Comparison of Nova Scotia and NSQIP

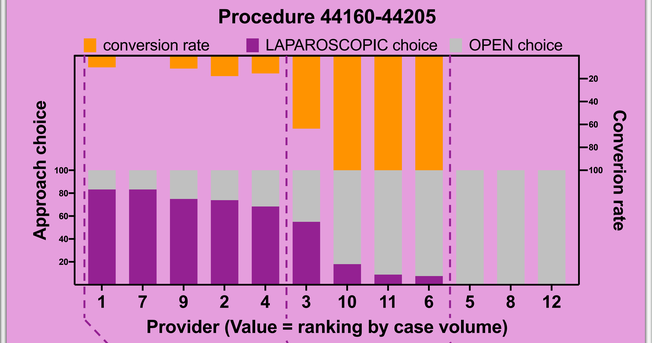


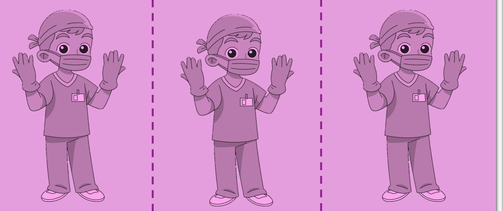
Conversion rates
*in patients of BMI Class I or above

Adjusted conversion rates



Institution-level operative decision making by individual providers

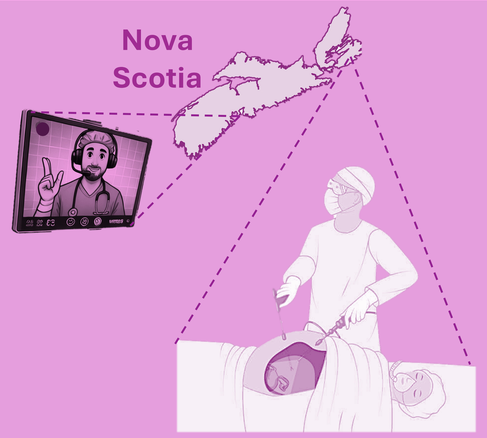




LAPAROSCOPY + + + + −

CONVERSION LOW HIGH

Conceptualization of remote proctoring in Nova Scotia



Conclusion

BMI is at the center of peri-operative decision.

Higher volume laparoscopic providers are less impacted by BMI presenting an opportunity for remote proctoring.

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