# **Medtronic** Engineering the extraordinary

# State of Surgery in the U.S. 2024 Report



JUNE 2024

# Summary of our survey

- In May 2024, Medtronic surveyed 1,000 U.S. surgeons to assess their perspectives on current technology in U.S. hospitals and operating rooms and to identify areas for improvement.
- The survey was conducted from May 17-31, 2024, via Censuswide.
- It collected responses to 14 questions from surgeons across surgical specialities, within public and private healthcare sectors.
- Surgeons were located across the 50 U.S. states including the District of Columbia.



## Number of surgeons surveyed per region



# Key findings

### U.S. surgeons lose a working month every year due to outdated tech

- Inefficient tech is causing surgeons to lose nearly four hours every week, which equates to one working month per year
- Over two thirds (69%) are spending time outside the hospital due to administrative work
- 64% say this is wasted time they'd like to reinvest in training and learning

### **Digital solutions could improve patient care**

- Nearly three out of four (74%) say technology in their OR is inefficient and could impact patient care
- 73% say the technology currently available to them limits them from performing to the best of their ability, while nearly two in three (62%) say they've considered leaving the field due to feeling burned-out
- Digital solutions like live stream are seen as a powerful solution, with 83% saying sharing surgical best practices and innovations through global digital networks could improve surgery

### **Better technology could unlock much-needed opportunities** for training

- The majority believe VR (85%) and digital training platforms (83%) could improve training
- Over a third (36%) say live stream technology would enhance surgical training through greater exposure to diverse surgical approaches and expertise

### While innovations make surgeons' lives easier outside of work, the tech in their place of work is far behind

- The majority (73%) said technology in the OR lags behind everyday technologies experienced in their personal life, like streaming or cloud content storage
- Meanwhile, 82% say they must rely on technologies like WhatsApp, Zoom or FaceTime to remotely share and view surgeries in the absence of dedicated surgical streaming platforms

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# Survey insights

# The potential for technology improvement to enhance patient care

"Thinking about the current technology you use (at the hospital), how much, if at all, do you think it could be improved to make it easier to deliver care?"

### **KEY FINDINGS:**

- **Region:** Across the U.S. there is almost unanimous agreement (97%) that current technology used in hospitals can be improved. The West Coast has the strongest view of all regions, tipping to 98%.
- **City:** 8 of the cities have unanimous agreement (100%) that technology can be improved. Jacksonville has the lowest in agreement, although this still sits at 89%.
- Length of Service: Surgeons with over 20 years of experience are less inclined to see room for improvement (50%) than those with under a year of experience (100%).
- Age: 61% of 25 to 34-year-olds believe there is significant room for improvement using technology. Just 1 in 10 (11%) of the oldest generation surveyed (55+) believe there is no room for improvement.

### **TOTAL SAMPLE**

Response	%	Count
Could be improved (Net)	97%	973
It could be significantly improved	62%	621
It could be slightly improved	35%	352
There is no room for improvement	3%	26
Not sure	0.1%	1





# Time lost to technological inefficiencies

How much time, if any, do you believe is lost or wasted due to outdated/inefficient technology in an average week?

Regional Area of practice Length of service Time lost per week, hours Time lost per week, hours Time lost per week, hours Vascular surgery 3.5 Over 20 years West 3.5 2.5 Urology 3.7 Trauma and orthopaedic... 4.0 16-20 years 4.4 South 4.0 Plastic surgery 3.2 11-15 years Paediatric surgery 4.2 3.9 Otorhinolaryngology (ENT).. 4.2 Northeast 3.7 6-10 years 3.8 Oral maxillofacial surgery 4.0 Obstetrics & gynaecology 3.6 1-5 years 3.2 Midwest 4.5 Neurosurgery 3.2 General surgery 3.9 Under a year TOTAL SAMPLE 3.8 Cardiothoracic surgery 3.5 TOTAL SAMPLE 3.8 TOTAL SAMPLE 3.8 2 3 4 5 6 2 3 5 4 6 2



# Time lost to technological inefficiencies

How much time, if any, do you believe is lost or wasted due to outdated/inefficient technology in an average week?

### **KEY FINDINGS:**

- **Region**: Almost half of surgeons (47%) in the Midwest believe that they lose 5-6 hours a week due to inefficient technology, with the region also containing the highest average of time lost (4.5 hours). The Western region had the lowest amount of time lost, though this still stands at 3.5 hours per week.
- **City**: Boston surgeons report losing the least amount of time ٠ of any city (2.96 hours per week), followed by Denver (3.17 hours), Charlotte (3.23 hours) and Phoenix (3.28 hours).
- **Length of Service**: Time lost due to inefficient technology increases with years of experience (excluding those with 20+ years). Those with 16-20 years of experience lose the most on average (4.43 hours), and those with less than one year of experience lose the least (0.75 hours).
- **Practice Area**: Otorhinolaryngology (ENT) surgeons lose the ٠ most amount of time a week with 1 in 5 (19%) claiming they lose 7-8 hours per week. While neurosurgeons had the lowest average figure (3.16 hours), almost 1 in 3 (27%) still lose upwards of 4 hours per week.

### **TOTAL SAMPLE**

Response	%	
None	1%	
Up to 30 minutes	1%	
31-59 minutes	8.8%	
1-2 hours	23%	
3-4 hours	29%	
5-6 hours	26%	
7-8 hours	10%	
9-10 hours	2%	





Count	
	7
	6
	88
	226
	293
	260
	101
	19

# Time lost to technological inefficiencies

How much time, if any, do you believe is lost or wasted due to outdated/inefficient technology in an average week?

Regional Area of practice Length of service Time lost per week, hours Time lost per week, hours Time lost per week, hours Vascular surgery 3.5 Over 20 years West 3.5 2.5 Urology 3.7 Trauma and orthopaedic... 4.0 16-20 years 4.4 South 4.0 Plastic surgery 3.2 11-15 years Paediatric surgery 4.2 3.9 Otorhinolaryngology (ENT).. 4.2 Northeast 3.7 6-10 years 3.8 Oral maxillofacial surgery 4.0 Obstetrics & gynaecology 3.6 1-5 years 3.2 Midwest 4.5 Neurosurgery 3.2 General surgery 3.9 Under a year TOTAL SAMPLE 3.8 Cardiothoracic surgery 3.5 TOTAL SAMPLE 3.8 TOTAL SAMPLE 3.8 2 3 4 5 6 2 3 5 4 6 2



# The impact of inefficient technologies on delivery of care

To what extent do you believe that 'Technology in the OR is inefficient and could impact the delivery of patient care'.

### **KEY FINDINGS:**

- **Region**: Over three guarters (77%) of surgeons from the Northeast agree technology in the OR is inefficient, more so than any other region.
- **City**: Of those surveyed in Boston, 89% believe tech in the • OR to be inefficient, the most of any city, closely followed by San Antonio (83%) and New York (80%).
- Length of Service: Surprisingly, those newest to surgical ۰ practice (under a year) were the most split on the impact of inefficient tech on patient care, with half believing technology in the OR is inefficient and the other half undecided.
- **Practice Area**: General surgery is the most affected by ۰ inefficient technology, with a significant 77% agreeing. Three quarters of Pediatric professionals (75%) also share this view, while Urology emerges as the least affected, with over a half (51%) in agreement.

### **TOTAL SAMPLE**

Response	%
Agree (Net)	7
Strongly agree	
Somewhat agree	
Neither agree nor disagree	
Disagree (Net)	
Somewhat disagree	
Not applicable	



	C	ount	
74%			738
32%			323
42%			415
18%			176
7%			72
3%			29
1%			14
42%			
			74%
6 50%	6.60%	70%	80%
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# The impact of inefficient technologies on delivery of care

To what extent do you believe that 'Technology in the OR is inefficient and could impact the delivery of patient care'.



# General attitudes to various technologies' impact on time

To what extent do you agree or disagree with the following statements:



# The performance impact of inefficient technology

"Do you find the technology you use in your role slows you down or limits you from performing to the best of your ability?"

### **KEY FINDINGS:**

- **Region**: Over 4 in 5 surgeons (82%) in the Midwest agree that technology slows them down, the highest of any region. This is followed closely by the West (79%) and the Northeast (76%).
- **City**: Of those surveyed in Boston, 85% believe that • inefficient technology limits their performance, the most of any city, closely followed by San Francisco (83%).
- **Length of Service**: Over three quarters (76%) of surgeons with 6-10 years of experience agree that the technology in hospitals slows them down. Those newest and oldest to healthcare had the lowest levels of agreement, with only one quarter of those with under a year of experience agreeing and half of those with over twenty years.
- **Practice Area**: Almost 8 in 10 (78%) general surgeons • agreed that technologies slowed them down, the highest of the practice areas. Surprisingly, only 45% of urologists agreed, the lowest of the practice areas.

### **TOTAL SAMPLE**

Response	%
Agree (Net)	7
Strongly agree	
Somewhat agree	
Neither agree nor disagree	
Disagree (Net)	
Somewhat disagree	
Not applicable	



		C	ount	
73%				729
31%				311
42%				418
17%				171
8%				75
5%				51
3%				25
429	6			73%
( 5(	10/	60%	70%	80%
0 30	) /0	00 /0	10/0	0070

# The performance impact of inefficient technology

"Do you find the technology you use in your role slows you down or limits you from performing to the best of your ability?"



# The potential for technology improvement to address regional disparities

To what extent do you agree or disagree with the following statements regarding technology and regional disparities in surgical care?



# How digital technologies can improve the state of surgery

How, if in any way, could digital technologies (e.g. Al and robotics) improve the state of surgery in the U.S.? (Tick all that apply)

luce errors in	
sts worldwide	
g tools could	
ital platforms	
d diagnostics	
ry.	

## Top 5 most popular chosen solutions

Digital technologies (e.g. AI and robotics) could help to red patient care.

Enabling real-time collaboration and consultation with specialis could enhance surgical care.

Improving surgical outcomes with data-driven decision-making be achieved.

Expanding patient education and engagement through dig could enhance patient outcomes.

Reducing surgical errors and complications with Al-supported and procedures could significantly improve surge





# The use cases for remote / live stream surgical technology

Which of the following statements, if any, do you think apply to how you would use remote/live-stream surgical technology in your practice?

### Top 5 most popular use cases for live stream

Allowing for greater flexibility in surgical training and education schedules could be provided.

Collaborating with specialists globally, overcoming geographical constraints, and enhancing patient care through exposure to diverse surgical approaches and expertise.

Patients are increasingly interested in the use of live stream in healthcare.

Improving surgical outcomes through real-time assistance and consultation.

Enhancing accessibility to a wider range of surgical techniques and innovations.



# The potential benefits of digital technologies in surgery globally

To what extent do you agree or disagree with the following statements regarding the potential benefits of digital technologies in surgery globally?



# Appendix

# Breakdown of surgeon locations - by state



# Breakdown of surgeon locations - by city

![](_page_19_Figure_1.jpeg)

# Respondent demographics

### **SURGEON COUNT:** REGION

Region	Count
Midwest	73
Northeast	189
South	358
West	380

### Length of service Under a year 4 1-5 years 115 6-10 years 574 266 11-15 years 16-20 years 39 Over 20 years 2

### **SURGEON COUNT: LENGTH OF SERVICE**

Count

Area of practice	Count
Cardiothoracic surgery	125
General surgery	484
Neurosurgery	275
Obstetrics & gynaecology	140
Oral maxillofacial surgery	65
Otorhinolaryngology (ENT) surgery	32
Paediatric surgery	59
Plastic surgery	93
Trauma and orthopaedic surgery	58
Urology	41
Vascular surgery	26

### **SURGEON COUNT: PRIVATE/PUBLIC**

Public or private practice	Count
Public	400
Private	600

### **SURGEON COUNT: AREA OF PRACTICE**

![](_page_20_Picture_11.jpeg)

### **About Medtronic**

Bold thinking. Bolder actions. We are Medtronic. Medtronic plc, headquartered in Dublin, Ireland, is the leading global healthcare technology company that boldly attacks the most challenging health problems facing humanity by searching out and finding solutions. Our Mission – to alleviate pain, restore health, and extend life – unites a global team of 90,000+ passionate people across 150 countries. Our technologies and therapies treat 70 health conditions and include cardiac devices, surgical robotics, insulin pumps, surgical tools, patient monitoring systems, and more. Powered by our diverse knowledge, insatiable curiosity, and desire to help all those who need it, we deliver innovative technologies that transform the lives of two people every second, every hour, every day. Expect more from us as we empower insight-driven care, experiences that put people first, and better outcomes for our world. In everything we do, we are engineering the extraordinary. For more information on Medtronic (NYSE:MDT), visit <u>www.Medtronic.com</u> and follow @Medtronic on <u>Twitter</u> and <u>LinkedIn</u>.

For more information and to request spokesperson comment or interviews, contact:

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