

# **Emergency General Surgery Verification Program**

One of the biggest challenges facing hospitals is caring for emergency general surgery (EGS) patients. EGS conditions account for more than 4 million hospital admissions annually, and these patients experience **three times the mortality rate and six times the complication rate** compared to elective surgical patients.

The American College of Surgeons in collaboration with the American Association for the Surgery of Trauma created the **EGS Verification Program** (EGS-VP) to help hospitals address this complex problem with proven approaches that **improve patient care and outcomes, reduce length of stay, and manage critical resources more cost effectively.**  EGS Emergency General Surgery

Verification

ACS

# 4 million

patients undergo Emergency General Surgery every year

# 50%

of all operative mortality is in emergency general surgery patients

# 25%

ACS

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of total inpatient costs every year are from Emergency General Surgery

### VALUE OF EGS-VP FOR HOSPITALS AND PATIENTS



### Optimized Resources and

**Infrastructure** EGS-VP helps hospitals create the right infrastructure to apply best practices and implement evidence-based guidelines to deliver optimal care. It enhances multidisciplinary coordination across specialties, improving timeliness of care and throughput of patients. Studies have shown that having an organized EGS care model was associated with a

reduction in mortality by 31% for

intestinal resection cohort.



Improved Patient Satisfaction

EGS-VP helps reduce length of stay and complication rates due to more timely care delivery. Patient satisfaction increases with fewer unnecessary delays, less time in the emergency department, and shorter hospital stays. Systematic reviews show that an EGS service model was associated with significantly decreased time to consult, time to OR, and overall length of stay.



#### Enhanced Efficiency, Reduced Costs

Utilizing an EGS model improves throughput, enhances efficiency of specialty surgical services, and increases productivity among elective surgeons. Some hospitals implementing this model have seen operative volume increase 25 percent and elective cases increase as much as 70 percent.



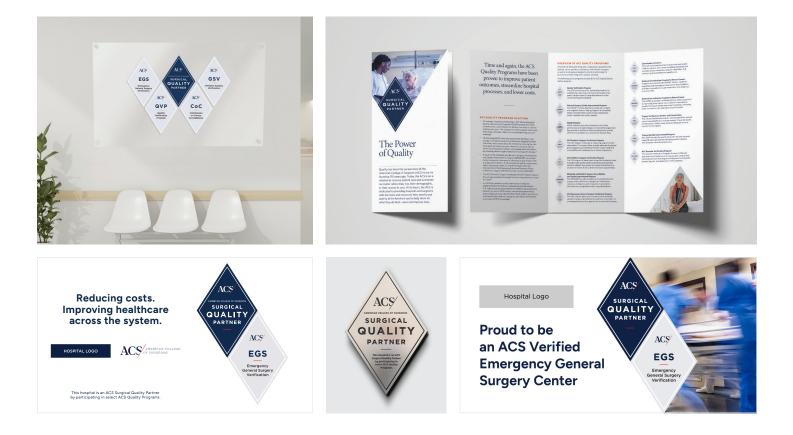
### Data-Driven Continuous Improvement

EGS data in ACS NSQIP gives hospitals the opportunity to benchmark their performance, closely monitor their results for both operative and non-operative management, and serve as a foundation for continuous improvement projects. EGS-VP provides the framework and accountability to make improvements stick.

Learn more at facs.org/egs.

# /Surgical Quality Partner Designation

Quality has been the cornerstone of the American College of Surgeons since its founding more than 110 years ago. Hospitals that participate and are verified or accredited in one of our ACS Quality Programs, including EGS-VP, earn the distinction of ACS Surgical Quality Partner (SQP). The SQP designation helps hospitals maximize the value of their investment in Quality Programs with a host of resources to promote this status. These communications and marketing materials allow hospitals to amplify their commitment to surgical quality in alignment with the ACS Power of Quality Campaign.



### WORKING WITH YOUR COMMUNICATIONS TEAM, THE ACS PROVIDES, AT NO EXTRA COST:

- A physical Surgical Quality Partner (SQP) diamond plaque (additional plaques are available for purchase)
- An SQP marketing toolkit, including EGS-VP program diamond, web banners, social cards, news releases, and more
- Print-ready marketing materials, such as banners, wraps, wall clings, and brochures
- Video testimonials to promote Quality Programs
- Media relations support

For more information, visit facs.org/quality