

**Minutes of Meeting
Health Services Council
Project Review Committee-I**

DATE: 8 August 2006 TIME: 2:30 PM

LOCATION: Health Policy Forum

ATTENDANCE:

Committee-I: Present: Victoria Almeida, Esq., (Vice Chair), Edward F. Almon, John W. Flynn, Robert S.L. Kinder, M.D., Richard Lepine, Robert J. Quigley, DC, (Chair)

Not Present: John Keimig, Amy Lapierre, Robert Ricci, Robert Whiteside, John Young

Excused Absence: Robert Bernstein, Joseph V. Centofanti, M.D.,

Other Members: Present: Larry Ross

Staff: Valentina Adamova, Michael K. Dexter, Joseph G. Miller, Esq., Don Williams, Jeffrey Garber (Intern)

Public: (Attached)

1. Call to Order, Approval of Minutes, Conflict of Interest Forms and Time Extension for the Minutes Availability

The meeting was called to order at 2:30 PM. The Chairman noted that conflict of interest forms are available to any member who may have a conflict. The Chairman requested a motion for the extension of time for the availability of minutes pursuant to the Open Meetings Act. A motion was made, seconded and passed.

2. General Order of Business

The first item on the agenda was the application of The Miriam Hospital for a Certificate of Need to acquire and operate a da Vinci S Surgical System to perform minimally invasive robotic surgery.

The applicant made a PowerPoint presentation to the Committee regarding their proposal. To the question regarding similar application by other hospitals and why Miriam was chosen instead of Rhode Island, the applicant stated that they see no reasons for other applications and that the applicant's devotion to men's health made a better fit for the DaVinci System because of its efficacy in prostatectomies.

Mr. Ross asked if Lifespan would issue a mandate to the other hospitals that all cases appropriate for robotic surgery be sent to

Miriam Hospital. The applicant responded that the other hospitals are aware of the application and the choice will be left to the surgeon though it will be likely that many surgeons will opt to move their patients to Miriam and perform the surgery themselves. The applicant mentioned that patients are already traveling large distances to get robotic surgeries so there is no need for every hospital in the state to have a robotic system since patients will be willing to travel to Miriam.

The applicant explained the concept of minimally invasive surgery and the evolution of laparoscopy. The applicant supplied a model laparoscopic unit for committee use and explained the limitations of laparoscopy such as a two dimensional view and limited dexterity. The applicant then brought out a robotic arm and explained the mechanics of the unit. The applicant stated the claw has a life expectancy of 5 uses.

According to the applicant, to use the da Vinci Surgical System at Miriam surgeons must have multiple credentials. The surgeons must be board certified in a surgical specialty. The surgeon must be credentialed for laparoscopic or thoracic surgery. The surgeon will have 16 hours of training, 3 hours using a cadaver model at a da Vinci Lab. The surgeon will then watch some cases and for the first four cases there will be nationally ranked proctors who monitor the surgeon. If the surgeon is successful the Miriam Hospital will then work independently. Another surgeon will always accompany the

surgeon; the procedure will not take place with just a surgeon and a nurse. After 25 procedures, Miriam Hospital will evaluate the surgeon's outcomes and success. If the surgeon is successful in performing the procedure they will then become a local proctor.

The applicant noted that the training would start with a few surgeons. As the surgeons become experts in the procedure they will then be sent to teach and train new surgeons. The applicant emphasized the importance of training the new surgeons in case the local proctors decide to leave the area. The applicant said that after around 25 procedures the surgeons will be more comfortable with the procedure and will decrease the length of time that the surgery takes and can generally perform 2 in 1 day. It is important that the surgeons that will be credentialed to do these procedures are actually performing them on a regular basis. The applicant noted the need for state of the art care in Rhode Island.

The Chairman noted that the Director is establishing the Tertiary Care Services Committee and one of the dimensions that the committee may be looking at is the da Vinci robotic system. It will not interfere with the instant CON, but may require certain standards for the credentials of the surgeons. That committee will be looking at volume and outcomes of the procedure.

The applicant said that Miriam Hospital would begin to train its surgeons and would be ready to start procedures in November of

2007. The applicant showed a movie of the prostatectomy procedure that was performed in Rochester, NY.

It was noted that Harvey Zimmerman of Spectrum Research Services, Inc. would develop a report for the Committee.

The Chairman asked if adding this robotic procedure would affect the scheduling and usage of the ORs at the hospital. The applicant said that the ORs have the capacity. The applicant confirmed that W & I Hospital's surgeons' will have access to the da Vinci unit.

The meeting was adjourned at 3:45 PM.

Respectfully submitted,

Valentina D. Adamova