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ASC case study

Summit Health Ambulatory Surgical Center (ASC): How McGRATH™ MAC video laryngoscopy transformed airway management

The strategic technology decision that increased adoption, eliminated clinical anxiety, and reduced complications†

† In multiple MDC groups when video laryngoscopy was used versus direct laryngoscopy.

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Executive summary

The challenge

When you're on an island: The ASC anesthesia reality

As the sole anesthesiologist at Summit Health's ASC, Dr. Adam Thaler faced a challenge every ASC leader understands: managing airways without the safety net of a hospital's resources. No backup team. No ENT down the hall. No margin for error.

Failed intubations in his previous hospital setting had taught him a costly lesson — one attempt escalated to horrible complications and ICU stay that was very costly.[5] At his ASC, performing complex urology procedures from kidney stones to prostate tumors, he needed absolute confidence in airway management.

His requirement wasn't negotiable — video laryngoscopy in every OR.

Dr. Thaler's three keys to airway excellence

1. **Eliminate airway management uncertainty**
2. **Provide objective anesthesia depth monitoring**
3. **Create predictable, efficient workflows**

Key facts

Summit Health ASC

Location:
New Jersey and New York

Specialties:
Complex outpatient urology cases requiring general anesthesia (kidney stones, vasectomies, prostate biopsies, bladder tumors, prostate procedures)

Facility:
3 ORs, all equipped with McGRATH™ MAC video laryngoscopes

Our guest

Dr. Adam Thaler
Medical Director
Board-certified Anesthesiologist
University of Pennsylvania trained
Former OR Director, Virtua Memorial Hospital
Former faculty, Thomas Jefferson University

Strategic solution selection and measurable impact

Making the case: How strategic evaluation led to the right choice

When Dr. Thaler evaluated video laryngoscopy solutions for Summit Health, he wasn't just looking for equipment — he needed proven technology that would work in an isolated ASC environment where he'd be the last line of defense.

His evaluation criteria were clear:

- Peer-reviewed data supporting **improved clinical outcomes**
- True total cost of ownership showing **economic viability**
- **Portability and reliability** that works every time and is immediately accessible
- **Ease of use** with no complicated setup when seconds matter

What made McGRATH™ MAC video laryngoscopes stand out

1. **Clinical evidence:** Extensive research showing improved first-pass rates,[2] even for less experienced practioners[3]
2. **Economic advantage:** 55% lower overall cost for McGRATH™ MAC video laryngoscope vs. competitor over a 24-month period[4]
3. **Portability:** Compact, battery-powered, ready instantly — no wheeling equipment from down the hall
4. **Proven track record:** Dr. Thaler's own experience carrying it on call eliminated his airway anxiety entirely

The research: real numbers

Dr. Thaler conducted his own comparative studies across multiple surgical care settings

McGRATH™ MAC video laryngoscope vs. GlideScope™

- **55% lower overall cost**[4] on direct equipment costs
- Portability and workflow integration

McGRATH™ MAC video laryngoscope vs. direct laryngoscopy

- **Some of the things he experienced in his facility:**
  - Reduced complications[5]
  - Higher first-pass success rates[2]
  - Reduced need for sterilization workflows
  - Faster intubation times[6]
  - Earlier surgical start times[6]

Implementation approach

Phase 1

McGRATH™ MAC video laryngoscopes in every OR (all 3 rooms)

Phase 2

Made video laryngoscopy the standard for every intubation

Phase 3

Disposable DL blades sit unused — video laryngoscopy became the only approach

“We don’t even attempt to do direct laryngoscopy any more.

I use McGRATH™ MAC video laryngoscopes for every intubation. Every one.”

Dr. Adam Thaler

Performance transformation

Results he experienced that speak for themselves

Summit Health ASC's experience with video laryngoscopy as standard practice:

- **Zero failed intubations** in three years of operation using McGRATH MAC™ video laryngoscope as first-line approach[§]
- **Faster case starts:** *"Surgeons can begin procedures sooner with confident airway management"*
- **Eliminated clinical anxiety:** *"I never have that fear. I never have that stress anymore, because I know that I can use this right away and be successful."* — **Dr. Adam Thaler**

Want to see how video laryngoscopy could impact your facility's costs? Calculate your facility's total cost of ownership — including equipment, supplies, reprocessing, complication prevention, and OR efficiency.

Try our cost calculator

Clinical outcomes | Operational efficiency | Cost optimization

The VIP test: A framework for every technology decision

During my time at a teaching hospital, I observed an interesting pattern. Whenever you have a VIP — a famous person, a politician's son or daughter — I noticed they would use video laryngoscopy. I asked why. They said, 'The odds are better. We don't want to damage their tooth or give them a sore throat.' I said, 'If you're going to do that for somebody that's a VIP, why wouldn't you treat everyone that way?'

I want to treat all my patients the way that I would want to be treated, the way that a VIP is treated. I give all my patients the same care as if they were a family member.

Dr. Adam Thaler
Medical Director, Summit Health ASC

Peer insights
and partnership value

What ASC leaders need to know

Lessons learned: Advice for other surgery centers facing similar challenges

Based on his successful implementation, Dr. Thaler offers these insights for ASCs evaluating airway management technology.

Key success factors

- **Do your own research.** Don't rely solely on hospital experience. ASC environments require different evaluation criteria. Study the peer-reviewed evidence and talk to colleagues in similar settings.
- **Look beyond equipment costs.** Consider total cost of ownership: sterilization, staff time, complication rates, medication savings, and the financial impact of just one prevented adverse event.
- **Apply the VIP test.** Would you use this technology on yourself or a family member? That's your standard for every patient.
- **Prioritize first-pass success.** In the ASC setting without backup resources, your first attempt needs to succeed. Video laryngoscopy dramatically improves those odds.[2]

Questions every ASC should ask when evaluating airway solutions

- What peer-reviewed clinical evidence supports this technology?
- How will this integrate with our existing anesthesia protocols?
- What training and ongoing support is provided?
- What are the total financial implications including direct costs, indirect savings, and complication prevention?
- Does this technology give me the same confidence I'd want for a family member?

Common pitfalls to avoid

- Inadequate training leading to poor adoption
- Reserving video laryngoscopy only for "difficult airways" instead of making it standard practice
- Focusing only on equipment costs without considering workflow and complication savings
- Setting unrealistic timeline expectations
- Poor communication about the clinical rationale across departments

Ready to transform your anesthesia protocols?

Listen to the podcast episode
outcomesrocket.com/ASCInsights

Hear Dr. Thaler's complete journey on the **ASC Insights Podcast,** including:

- The costly complication that changed his approach forever
- Why video laryngoscopy was "locked in secure cabinet" at his first hospital
- Detailed ROI calculations and implementation strategies
- His advice for ASC leaders making technology decisions

Next steps

- **Schedule consultation with Medtronic ASC specialists**
- **Arrange product demonstration at your facility**
- **Review financing and implementation options**
- **Connect with reference customers**

The Medtronic impact in surgical care for Dr. Thaler

1. **No airway-related complications in three years** using McGRATH™ MAC video laryngoscope as standard first-line approach
2. **Eliminated clinical anxiety** about airway management in isolated ASC environment
3. **55% lower overall cost**[4] compared to competitive video laryngoscopy solutions
4. **100% adoption** across all ORs — video laryngoscopy became the only intubation method used

Contact us today

Ready to explore how Medtronic can support your ASC's success?

Learn more about the series

To learn more about Summit Health's transformation and how Medtronic can help optimize anesthesia protocols at your ASC, visit **outcomesrocket.com/ASCInsights**

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