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Letter to the Editor

Opportunity cost of 12 minutes of tardiness of late first case of the day starts

We appreciate Doctors Dexter and Epstein's comments

regarding our manuscript, "Enumerating the causes and burden

of first case operating room delays." The assessment of opportunity

cost is difficult, and we agree that assessment of opportunity cost

can be inaccurate. To clarify for Doctors Dexter and Epstein, in

our study all services had either eight or ten-hour blocks and it is

not unusual for our surgeons to exceed their total allotted block

portunity cost for first case delays and recognize that this may

not accurately reflect the true cost. Similarly, our calculation of nursing overtime cost was also an estimation of maximal cost.

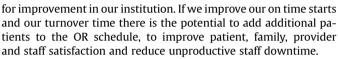
We acknowledge that our results may not be generalizable to all

forest from the trees. What we try to emphasize in our study is that 55% of our first cases were delayed with a median delay

of 12 minutes. We've identified this as a significant opportunity

However, we feel that it is important to not lose sight of the

In our study, we chose to estimate the maximum potential op-



Although the comment by Doctors Dexter and Epstein that, "If staff are scheduled to work 8 hours, there is no opportunity cost when the last case ends before the eight-hour block is over." may be true, there are still significant opportunities to improve efficiency and optimize the utilization of the operating room staff. Thank you for your interest in our research.

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time.

operating rooms.



