Total Hip and Knee Replacements

FISCAL YEAR 2002: JULY 1, 2001 TO JUNE 30, 2002





PENNSYLVANIA HEALTH CARE COST CONTAINMENT COUNCIL JUNE 2005



The Pennsylvania Health Care Cost Containment Council (PHC4) was established as an independent state agency by the General Assembly and the Governor of the Commonwealth of Pennsylvania in 1986. To help improve the quality and restrain the cost of health care, PHC4 promotes health care competition through the collection, analysis and public dissemination of uniform cost and qualityrelated information.

Key Findings

- Total hip and knee replacements have steadily increased in Pennsylvania. Between 1993 and 2002 the number of knee replacements increased by 70.1 percent, and the number of total hip replacements increased by 48.6 percent.
- Readmissions due to deep joint infection or device problem resulted in approximately \$30 million in charges and 6,095 hospital days, those for blood clot (lung/leg) resulted in \$2.4 million in charges and 889 hospital days, and those for wound infection resulted in \$2.7 million in charges and 703 hospital days.
- The statewide complication rate for deep joint infection or device problem was 2.4 percent. The statewide blood clot (lung/leg) rate was 1.3 percent. For wound infection the statewide rate was 0.5 percent.
- In 2002 the average number of days a patient spent in the hospital following a total hip or knee replacement was 3.7 days. This does not include additional care, such as rehabilitative care, that, on average, added 7.7 days for the patients in this study.
- "Bilateral total joint replacements," in which both knees or both hips are replaced during the same hospital stay under one anesthesia, have been more popular in recent years. Between 1993 and 2002, the percent of bilateral knee replacements in Pennsylvania nearly tripled – from 3.4 percent of all knee replacements to 9.0 percent. The percent of bilateral total hip replacements also increased, from 1.2 percent in 1993 to 2.2 percent in 2002.



Understanding the Report

Why is it important to look at total hip and knee replacements?

Total hip and knee replacements are frequently performed, costly surgeries. Over the last 10 years the number of joint replacements has continually increased. This increase is related to several factors: people are living longer, the proportion of elderly is increasing, and the incidence of arthritis – the number one reason for disability in United States – is increasing. During this time there have also been important changes to the devices used in joint replacement and the clinical management of joint replacements. There have been changes in hospital lengths of stay and subsequent inpatient rehabilitation hospital stays. While some studies have focused on smaller groups or population subsets, there is little information available from large-scale studies such as that contained in this analysis.

Given the many changes surrounding total hip and knee replacements, the Council chose to evaluate and report patient care outcomes for joint replacements performed in Pennsylvania. Current medical literature suggests that assessing patient outcomes, such as complications and readmissions, can provide important insights into the quality of care. Not only does this report provide information to consumers and payors of health care services, it is also a useful tool for hospitals and surgeons to use when examining their processes and considering changes that may improve quality of care.

What is joint replacement?

Joints provide motion and flexibility to the human frame. They are formed where two or more bones meet and are connected by tissue called cartilage. Healthy cartilage provides a protective "cushion," allowing smooth, lowfriction movement of the joint. If the cartilage becomes damaged, the tissues around the joint become inflamed, causing pain. With time, the cartilage wears away, allowing the rough edges of bones to rub against each other, causing more pain.¹ To help alleviate this pain and improve functional status, a physician may recommend joint replacement.

Joint replacement is a major surgical procedure in which certain parts of a damaged or arthritic joint are removed and replaced with an artificial joint.² The artificial joint is designed to move like a normal, healthy joint and is generally composed of a metal piece that fits closely into a matching sturdy plastic piece. Plastic bone cement may be used to anchor the artificial joint into the bone. Joint replacements also can be implanted without cement when the artificial joint and the bone are designed to fit and lock together directly.³ While joint replacements are performed on other joints - including the ankle, foot, shoulder, elbow and fingers - total hip and knee replacements are the most common and can either be total or partial. Total hip, total knee, and partial knee replacements are primarily performed to treat arthritis and other forms of cartilage damage. Partial hip replacements are primarily related to the repair of hip fractures.

In a total hip replacement, the damaged ball (the upper end of the femur – often referred to as the thigh bone) is replaced by a metal ball attached to a metal stem fitted into the femur, and a plastic socket is implanted into the pelvis, replacing the damaged socket. In a knee replacement, the damaged ends of the bones and cartilage are replaced with metal and plastic surfaces that are shaped to restore knee movement and function.⁴ Surgery is performed using a variety of surgical techniques.

- ² WebMD.
- ³ American Academy of Orthopaedic Surgeons.
- ⁴ American Academy of Orthopaedic Surgeons.

¹ Food and Drug Administration.



The "traditional" or "open" technique involves making a larger incision compared to minimally invasive surgery, which may involve one or more smaller incisions. A computer may also be used to assist the surgeon during surgery.

After the joint replacement is completed, most patients stay in the hospital for a few days. The recovery period continues with rehabilitative care in various settings. The length of the recovery period depends on a patient's general health, age and other factors, but many people can resume their normal activities within several weeks of surgery.

There are several reasons why someone may need a total hip or knee replacement. Osteoarthritis – a degenerative joint disease caused by the breakdown of cartilage – is the most common reason. Factors that can lead to damaged cartilage and osteoarthritis are conditions such as defective joints or cartilage present at birth, excessive body weight, joint trauma such as fractures, ligament tears and other injuries that have led to joint deterioration. Likewise, the symptoms of rheumatoid arthritis – a chronic inflammation of the joint lining, which causes pain, stiffness and swelling - may also be alleviated by joint replacement. Other reasons for joint replacement include loss of bone caused by poor blood supply and bone tumors;⁵ these conditions, however, are considered clinically complex and joint replacements due to these conditions are not included in this report.

⁵ Food and Drug Administration.

What is included in this report?

This report includes information on approximately 9,800 total hip replacements and 20,000 total or partial knee replacements performed in Pennsylvania between July 1, 2001 and June 30, 2002, at an average charge of more than \$27,000 and \$26,000, respectively. Only the performance of hospitals and surgeons with 30 or more cases (hip and knee replacements combined) was evaluated to determine if outcomes were within normal limits, extremely high or extremely low.

Accounting for high-risk patients

Some patients who undergo joint replacements have more complex conditions than others. These conditions may be associated with the condition for which the joint replacement is being performed and/or other chronic diseases such as diabetes, heart disease or hypertension. In order to report fair comparisons among hospitals and surgeons, PHC4 developed a complex mathematical formula to "riskadjust" the data, meaning that the formula takes into consideration differences among individual patients that had the potential to influence hospitals' and surgeons' outcomes. Risk-adjusting the data is important because sicker patients might be more likely to develop complications following joint replacements, be readmitted, or stay in the hospital longer. A comprehensive description of how these adjustments are made can be found in the Technical Notes document posted on PHC4's Web site at www.phc4.org. With the exception of Number of Cases and Average Hospital Charge, all of the following measures are adjusted for differences in patient risk factors.

What is measured in this report and why are these measures important?

• **Total Cases** – This is the number of total hip and total or partial knee replacements analyzed in this report. The number of cases gives an idea of the experience that



hospitals and surgeons have in performing these types of procedures. It is important to note, however, that some total hip and knee replacement patients were not included in this analysis, for example, those that had a replacement due to a bone fracture or bone cancer or those who had a "revision" of a previously replaced joint. Therefore, the actual number of procedures performed by a hospital or surgeon may be higher. Also, this report does not include information about partial hip replacements, which are often performed to treat conditions other than those treated by total hip replacements.

Complications

- **Deep Joint Infection or Device** • **Problem –** Deep joint infection or problems with the device are very serious and may ultimately result in the removal of the implanted joint. The statistical ratings in this measure represent whether the percentage of total hip or knee replacement patients who were treated for a deep joint infection or a device problem during the initial hospitalization, or in a subsequent general acute care hospitalization that was within 365 days of the original joint replacement, was within normal limits, extremely high or extremely low. Because deep joint infections and device problems generally do not surface early on, this measure follows total hip and knee replacement patients for a full year.
- **Blood Clot Lung/Leg** Blood clots can occur when a vein is damaged or when decreased physical activity causes the flow

of blood to slow down or stop. This measure includes blood clots in the lung (pulmonary embolism) or leg (deep vein thrombosis). The statistical ratings represent whether or not the percentage of total hip or knee replacement patients who had a blood clot in their lung or leg during the initial hospitalization, or in a subsequent general acute care hospitalization that was within 45 days of the original joint replacement, was within normal limits, extremely high or extremely low. Precautionary measures – such as the use of blood thinning medications (anticoagulants), elastic stockings and exercises to increase blood flow in the leg muscles – may help to avoid blood clots. Because blood clots most often surface either a few days following surgery or a few weeks later, this analysis includes a 45-day follow-up period on blood clots that may be a complication of the joint replacement

• Wound Infection – Wound infections are caused by bacteria contaminating the surgical incision and may involve different layers of the skin and soft tissue. This measure is reported for hospitals only. It does not include deep joint infections, which are captured under the deep joint infection or device problem measure. The statistical ratings represent whether or not the percentage of total hip or knee replacement patients who had a wound infection during the initial hospitalization or in a subsequent general acute care hospitalization that was within 30 days of

More Data on PHC4's Web Site

Additional information is posted on the PHC4 Web site at www.phc4.org:

- Numbers behind the outcome figures and symbols.
- Technical Notes.
- Hospital and surgeon comments about the report.



the original joint replacement, was within normal limits, extremely high or extremely low. High quality care may reduce the risk of infection, which in turn may lessen the risk of readmissions and/or deep joint infections.

Other Measures

- Readmission (within 30 days) Some patients are readmitted to the hospital following joint replacement surgery. The statistical ratings represent whether or not the percentage of total hip or knee replacement patients who were readmitted to a Pennsylvania hospital within 30 days of being discharged from the hospital where the original total hip or knee replacement was performed, was within normal limits, extremely high or extremely low. Readmissions may be planned or unplanned. However, whether the readmission is planned or unplanned cannot be distinguished in the data submitted to PHC4, so any readmission, planned or unplanned, was included in this measure. Readmission rates are important from both a quality of care and cost standpoint. While some readmissions are planned and/or unavoidable, high quality care may lessen the need for subsequent hospitalizations.
- Post-Operative Length of Stay This measure represents how long a patient stayed in the hospital after undergoing a total hip or knee replacement. Length of stay is reported in average days. The postoperative length of stay represents the immediate recovery period in the hospital. Upon discharge, patients often receive rehabilitative care in other settings.

Average Hospital Charge – The amount a hospital bills for a patient's care is known as the charge. The charges do not include professional fees (e.g., physician fees) or other additional post-discharge costs, such as rehabilitation treatment, long term care and/or home health care. Hospitals generally do not receive full reimbursement of their charges because insurance companies or other large purchasers of health care services generally negotiate discounts with hospitals. The amount collected by the hospital, therefore, may differ substantially from the charge. Hospital charges are averaged and regional adjustments were made because charge components often vary by regions of the state. Despite their limitations, charges are a commonly reported surrogate for health care costs.

Uses of the report

This report can be used as a tool to examine short-term hospital and patient outcomes for total hip and knee replacements. It is not intended to be a sole source of information in making decisions about joint replacements, nor should it be used to generalize about the overall quality of care provided by a hospital or a surgeon. Readers of this report should use it in discussions with their physicians who can answer specific questions and concerns about total hip and knee replacements.

• **Patients/consumers** can use this report to aid in making decisions about where and with whom to seek treatment involving total hip and knee replacements. This report should be used in conjunction with a physician or other experienced health care provider when making decisions about joint replacements.



- **Group benefits purchasers/insurers** can use this report as part of a process to determine which hospitals and surgeons are providing high quality joint replacement care for their employees, subscribers, members or participants.
- Health care providers can use this report to compare their results to other providers around the state and as an aid in identifying opportunities for quality improvement and cost containment.
- **Policy makers/public officials** can use this report to enhance their understanding of health care issues, to ask insightful questions, to raise public awareness of important issues and to help constituents identify quality health care options.
- **Everyone** can use this information to better understand the delivery of care options in Pennsylvania and raise important questions about why differences exist among hospitals and surgeons.

Where does the data come from?

Pennsylvania hospitals are required by law to submit certain information to PHC4. The data used for this analysis was submitted by acute care hospitals in Pennsylvania that perform total hip and/or knee replacements. It encompasses inpatient hospital discharges from July 1, 2001 to June 30, 2002 in which the patient underwent a total hip or knee replacement. The information that hospitals are required to submit includes data used to indicate the health status of the patient and the treatments received. Data from subsequent hospitalizations was also used to identify deep joint infections or device problems, blood clots in lung/leg, wound infections and readmissions occurring within specified timeframes following the total hip or knee replacement.

All of the data included in the report was subject to a multi-phase verification process by PHC4 and the hospitals submitting the data. Hospitals were requested to assure the accuracy of the data for the hospitalizations in which the joint replacement was performed and to confirm that all cases had the correct surgeon assignment. Surgeons were requested to perform a patient level review of these records and then attest to the accuracy of the data and surgeon assignment.

To further ensure the quality of the data included in this report, PHC4 contracted with an independent auditing company to determine the reliability of data submitted to PHC4 compared to the information included in the medical record. For additional information, see the Technical Notes associated with this report on PHC4's Web site at www.phc4.org.

Hospitals and surgeons may have commented on their data. These comments are posted on the PHC4 Web site.

Limitations of the report

Many surgeons consider improved functional status – the measure of an individual's level of independence in performing normal activities of life – to be the gold standard of joint replacement outcomes. Because functional status is not included in the information that hospitals are required to send to the Council, it is not covered in this report.

The longevity of the joint replacements, another important aspect of measuring treatment effectiveness, is not captured in this report. Many joints have been found to be functioning successfully after 10 years, and in



Total Hip and Knee Replacements

Total number of cases:	29,710
Total number of hip cases:	9,769
Total number of knee cases:	19,941
Deep joint infection or device problem rate:	2.4%
Blood clot (lung/leg) rate:	1.3%
Wound infection rate:	0.5%
Readmission rate:	4.4%
Average post-operative length of stay:	.3.7 days
Average hospital charge for total hip replacement	\$27,759
Average hospital charge for knee replacement	\$26,015

What do the symbols mean?

The symbols in this report represent the patient outcome results of hospitals and surgeons who performed total hip and knee replacements. A statistical test is done to determine whether differences in the results are simply due to chance or random variation. A difference is called "statistically significant" when there is a 95 percent confidence level that the difference is not likely to result from chance or random variation. Using wound infection as an example:

- Lower than expected (meaning that there were fewer wound infections than expected after accounting for how sick the patients were in that hospital or for that surgeon)
- Same as expected (meaning that the number of wound infections was the same as expected after accounting for how sick the patients were in that hospital or for that surgeon)
- Higher than expected (meaning that there were more wound infections than expected after accounting for how sick the patients were in that hospital or for that surgeon)

some cases as long as 20 years. With current improvements in materials, prosthetic designs and surgical techniques, artificial joints implanted today may last even longer.

The data used in this analysis is a subset of information documented in the patient's medical record and hospital's billing record. Additional data may be useful to better understand differences in the care process from one hospital to another and one surgeon to another even within the same hospital. Despite careful efforts by hospitals, surgeons and Council staff, variability may still exist due to differences in the diagnostic tests used, interpretation of test results and in documentation. Finally, orthopaedics is a specialty of immense breadth and variety. The field of orthopaedics encompasses a wide variety of diseases and conditions, including but not limited to, fractures and dislocations, torn ligaments, tendon injuries, ruptured discs and low back pain, bone tumors, muscular dystrophy and cerebral palsy. Because this report focuses on total hip and knee replacements, it may include only a portion of the work that an orthopaedic surgeon performs.

Acknowledgements

PHC4 wishes to acknowledge and thank the Pennsylvania hospitals and surgeons who participated in the data collection and verification process used for this report.

PHC4 also wishes to thank our Technical Advisory Group and the orthopaedic surgeons who advised us during the development of this report.



				Co	omplicatio	ns			Aver Hospital	age Charge
Hospital	Hip Cases	Knee Cases	Total Cases	Deep Joint Infection or Device Problem	Blood Clot Lung/Leg	Wound Infection	Readmission	Post-op Length of Stay	Hip	Knee
Statewide	9,769	19,941	29,710					3.7	\$27,759	\$26,015
Abington Memorial	146	204	350	\odot	\odot	\odot	\odot	3.8	\$58,884	\$46,622
Albert Einstein	56	125	181	\odot	\odot	\odot	0	2.7	\$40,073	\$42,321
Aliquippa Community	12	26	38	\odot	\odot	\odot		2.9	\$28,180	\$24,168
Alle-Kiski	84	222	306	\odot	\odot	\odot	0	3.8	\$24,745	\$21,063
Allegheny General	133	289	422	\odot		\odot	\odot	4.6	\$29,477	\$23,370
Altoona	55	179	234	\odot	\odot	\odot	\odot	3.3	\$21,733	\$20,239
Armstrong County Memorial	15	61	76	\odot	\odot	\odot	\odot	3.6	\$41,476	\$36,115
Bloomsburg	24	93	117	\odot	\odot	\odot	\odot	3.2	\$15,840	\$16,687
Bon Secours Holy Family	44	115	159	\odot	\odot	\odot	\odot	2.9	\$16,985	\$16,379
Bradford Regional	11	23	34	•	\odot	\odot	•	3.7	\$24,573	\$22,770
Brandywine	43	75	118	\odot	\odot	\odot	\odot	3.6	\$33,974	\$33,512
Brownsville General	8	31	39	•	\odot	\odot	\odot	3.3	\$24,373	\$21,958
Butler Memorial	50	121	171		\odot	\odot	\odot	3.8	\$13,424	\$11,312
Canonsburg General	36	87	123	•	\odot	\odot	•	3.4	\$19,643	\$17,916
Carlisle Regional	54	150	204		\odot	٠	\odot	4.1	\$31,279	\$30,404
Central Montgomery	26	59	85		\odot	\odot	•	4.7	\$32,738	\$31,552
Centre Community	146	284	430	\odot	\odot	\odot	\odot	3.3	\$19,938	\$18,838
Chambersburg	70	141	211	\odot	\odot	\odot		3.9	\$18,531	\$17,446
Charles Cole Memorial	18	45	63	\odot	\odot	\odot	\odot	3.4	\$23,434	\$17,548
Chester County	48	88	136	\odot	\odot	\odot	•	3.9	\$20,615	\$17,639
Chestnut Hill	27	41	68	•	\odot	\odot	•	4.9	\$43,005	\$51,634
Clarion	29	58	87	•	\odot	\odot	•	2.8	\$14,421	\$15,958
Clearfield	20	35	55	\odot	\odot	•	\odot	4.1	\$25,875	\$24,949
Community Lancaster	24	41	65	•	\odot	\odot	\odot	3.8	\$24,593	\$23,442
Community/Scranton	83	163	246	\odot	\odot	\odot	\odot	3.9	\$29,940	\$26,469
Conemaugh Valley Memorial	89	194	283	\odot	\odot	\odot	\odot	4.3	\$28,944	\$27,400
Crozer-Chester	63	181	244	\odot	\odot	\odot	\odot	3.6	\$50,664	\$49,799

The complications, readmission, and length of stay results account for varying illness levels among patients.

Complications were counted when a deep joint infection or device problem occurred within 365 days, a blood clot occurred within 45 days, and/or a wound infection occurred within 30 days of the surgery. A readmission was counted when a patient was readmitted to an acute care hospital for any reason (except rehabilitation) within 1-30 days of the discharge date of the hospitalization in which the hip or knee replacement was performed. Length of stay is the average number of days spent in the hospital following the surgery.

Lower than expected

- Same as expected
 - Higher than expected

Hospitals



				Complications					Aver Hospital	age Charge
Hospital	Hip Cases	Knee Cases	Total Cases	Deep Joint Infection or Device Problem	Blood Clot Lung/Leg	Wound Infection	Readmission	Post-op Length of Stay	Hip	Knee
Dolawaro County Momorial	63	162	225		<u>.</u>	<u> </u>		5.5	\$62,126	¢47 112
	70	102	225	0	0	0		2.0	\$02,120	\$77,112
DuPeis Pagional	19	70	124	0	0	0		2.9	\$33,400	\$35,000
	45	101	124	0		0	0	5.1	\$19,177	\$19,229
Easton	57	101	158	0	•	0	0	3.4	\$22,755	\$24,090
Elk Regional	37	114	151	0	•	0	0	2.9	\$12,594	\$12,469
Ellwood City	11	35	46	0	0	0	0	3.6	\$20,126	\$19,616
Ephrata Community	51	102	153	O	\odot	•	•	4.0	\$17,964	\$16,068
Evangelical Community	46	146	192	0	\odot	•	0	3.3	\$14,091	\$11,243
Forbes Regional	101	228	329	•	\odot	\odot	\odot	3.7	\$26,222	\$26,451
Frankford	53	163	216	\odot	\odot	\odot	\odot	3.8	\$38,627	\$59,906
Frick	8	49	57	\odot	\odot	•		3.2	\$17,869	\$14,158
Geisinger Wyoming Valley	69	135	204	0	\odot	\odot	O	3.7	\$18,214	\$16,807
Geisinger/Danville	150	249	399	\odot	\odot	\odot	\odot	4.0	\$17,988	\$17,538
Gettysburg	26	56	82	\odot	\odot	\odot	\odot	3.3	\$17,897	\$18,601
Gnaden Huetten Memorial	8	32	40	\odot	\odot	\odot	\odot	3.2	\$13,763	\$16,402
Good Samaritan Regional	13	26	39	\odot	\odot	\odot	\odot	6.3	\$19,773	\$20,475
Good Samaritan/Lebanon	55	151	206	\odot		\odot	\odot	3.5	\$19,667	\$17,704
Graduate	13	75	88	\odot	\odot	•	\odot	5.2	NR	\$97,031
Grand View	77	159	236	\odot	\odot	\odot	\odot	3.6	\$24,947	\$26,600
Greene County Memorial	9	27	36	\odot	\odot	\odot	\odot	4.4	\$16,438	\$14,696
Hahnemann University	59	122	181	\odot	\odot	\odot	\odot	4.0	\$79,849	\$90,670
Hamot	126	356	482		0	\odot	\odot	3.0	\$27,690	\$24,752
Hanover	43	133	176	\odot	\odot	\odot		4.0	\$21,221	\$18,157
Hazleton General	21	39	60	\odot	\odot	\odot	\odot	3.8	\$21,810	\$25,701
Holy Redeemer	67	189	256	\odot	\odot	\odot	\odot	3.2	\$51,508	\$51,659
Holy Spirit	98	220	318	\odot	\odot	\odot	\odot	4.1	\$18,710	\$17,882
Hospital University PA	28	23	51	\odot	\odot	\odot	\odot	3.9	\$56,404	\$46,642
Indiana Regional	56	97	153	0	\odot	\odot	\odot	3.4	\$26,592	\$23,594

Lower than expected

• Same as expected

• Higher than expected

NR Too few cases to report

The complications, readmission, and length of stay results account for varying illness levels among patients.

Complications were counted when a deep joint infection or device problem occurred within 365 days, a blood clot occurred within 45 days, and/or a wound infection occurred within 30 days of the surgery. A readmission was counted when a patient was readmitted to an acute care hospital for any reason (except rehabilitation) within 1-30 days of the discharge date of the hospitalization in which the hip or knee replacement was performed. Length of stay is the average number of days spent in the hospital following the surgery.



				Complications		ns			Aver Hospital	age Charge
				Deep Joint						
	Hip	Knee	Total	Infection or Device	Blood Clot	Wound		Post-op Length		
Hospital	Cases	Cases	Cases	Problem	Lung/Leg	Infection	Readmission	of Stay	Нір	Knee
J C Blair Memorial	19	29	48	\odot	\odot	\odot	\odot	4.6	\$22,309	\$21,553
Jameson Memorial	35	100	135	\odot	\odot	\odot	\odot	4.0	\$21,018	\$18,305
Jeanes	50	95	145	\odot		\odot	\odot	4.4	\$39,877	\$60,154
Jeannette Memorial	18	61	79	O	\odot	\odot	•	3.4	\$23,792	\$24,531
Jefferson Regional	137	302	439	O	\odot	\odot	O	4.0	\$18,863	\$17,610
Lancaster General	207	417	624		\odot	\odot	\odot	3.5	\$16,195	\$15,094
Lancaster Regional	53	127	180	\odot	\odot	\odot	\odot	3.6	\$35,023	\$33,088
Latrobe Area	65	142	207	\odot	\odot	\odot	\odot	3.5	\$19,231	\$17,985
Lehigh Valley	265	436	701	0	\odot	\odot	\odot	3.2	\$25,608	\$22,934
Lehigh Valley/Muhlenberg	50	78	128	\odot	\odot	\odot	\odot	3.6	\$21,156	\$20,845
Lewistown	16	33	49	\odot	\odot	\odot	\odot	3.6	\$18,498	\$17,166
Main Line Bryn Mawr	147	275	422	\odot	\odot	\odot	\odot	3.6	\$25,906	\$29,182
Main Line Lankenau	51	86	137	\odot	\odot	\odot	\odot	4.1	\$31,010	\$32,234
Main Line Paoli	78	162	240	\odot	\odot	\odot	\odot	3.4	\$30,096	\$29,508
Marian Community	17	48	65	\odot	\odot	\odot	\odot	3.7	\$15,549	\$17,271
Meadville	59	138	197	\odot	\odot	\odot	\odot	2.8	\$17,072	\$18,241
Medical Center Beaver	75	180	255	\odot	•	\odot		3.9	\$15,873	\$14,880
Memorial York	53	95	148	\odot	\odot	\odot	\odot	3.4	\$15,692	\$15,485
Memorial/Towanda	24	60	84	\odot	\odot	\odot	\odot	3.6	\$30,745	\$32,923
Mercy Fitzgerald	16	46	62	\odot	\odot	\odot	\odot	3.0	\$40,392	\$37,968
Mercy Pittsburgh	61	100	161	\odot	\odot	\odot	\odot	3.8	\$31,166	\$28,341
Mercy Suburban	14	36	50	\odot	\odot	\odot	\odot	4.0	\$30,873	\$29,179
Mercy/Scranton	56	113	169	\odot	\odot	\odot	\odot	3.8	\$24,642	\$22,287
Mercy/Wilkes-Barre	34	65	99	\odot	\odot	\odot	\odot	3.4	\$25,676	\$22,940
Milton S Hershey	99	124	223	\odot	\odot	\odot	\odot	2.4	\$18,693	\$15,757
Monongahela Valley	37	161	198	\odot	\odot	\odot		3.5	\$21,393	\$24,248
Montgomery	65	211	276	0	\odot	\odot	\odot	3.9	\$32,482	\$28,160
Moses Taylor	61	174	235	\odot	\odot	\odot	\odot	3.5	\$14,510	\$14,440

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 \bigcirc Lower than expected

- Same as expected
 - Higher than expected

Hospitals



				Complications					Aver Hospital	age Charge
Hospital	Hip Cases	Knee Cases	Total Cases	Deep Joint Infection or Device Problem	Blood Clot Lung/Leg	Wound Infection	Readmission	Post-op Length of Stay	Нір	Knee
Nason	8	37	45	\odot	\odot	\odot	\odot	4.1	\$15,347	\$14,577
Nazareth	16	68	84	\odot	\odot	\odot	\odot	2.8	\$21,683	\$25,260
Ohio Valley General	34	69	103	\odot	\odot	\odot	\odot	3.1	\$23,617	\$19,471
Pennsylvania	504	1,099	1,603	\odot	0	\odot	\odot	3.7	\$46,133	\$41,489
Phoenixville	37	63	100	\odot	\odot		\odot	4.4	\$32,361	\$30,114
Pinnacle Health	262	687	949	•	\odot	\odot	\odot	3.5	\$21,218	\$21,656
Pocono	36	38	74	\odot		\odot	\odot	3.7	\$19,149	\$21,096
Pottstown Memorial	27	52	79	\odot	\odot	\odot	\odot	4.1	\$48,065	\$41,851
Pottsville Warne Clinic	48	92	140	\odot	\odot	\odot	0	4.0	\$19,120	\$18,202
Presbyterian	24	57	81	\odot	\odot	\odot	\odot	3.3	\$32,942	\$29,772
Reading	203	470	673	\odot	0	\odot	0	3.6	\$13,032	\$11,388
Riddle Memorial	40	139	179	\odot	\odot	\odot	\odot	4.0	\$36,229	\$36,571
Robert Packer	115	160	275	\odot	\odot	\odot	\odot	3.1	\$16,176	\$14,955
Roxborough Memorial	8	28	36	\odot	\odot	\odot	\odot	3.5	\$27,471	\$23,960
Sacred Heart/Allentown	55	124	179	\odot	\odot	\odot	0	3.9	\$21,252	\$19,058
Saint Vincent Health	113	166	279		\odot	\odot	•	3.4	\$22,634	\$23,070
Sewickley Valley	211	302	513	0	\odot	\odot	\odot	4.0	\$21,690	\$20,500
Shamokin Area Community	11	32	43	\odot	\odot	\odot	\odot	3.2	\$16,986	\$15,109
Sharon Regional	57	126	183	\odot	\odot	\odot	\odot	3.6	\$30,064	\$28,145
Soldiers & Sailors	17	27	44		\odot	\odot	\odot	4.6	\$22,237	\$21,134
Somerset Center Health	9	24	33	\odot	\odot	\odot	\odot	4.8	\$18,565	\$17,940
St Clair Memorial	99	201	300	\odot	\odot	\odot	\odot	4.3	\$16,993	\$16,748
St Joseph/Reading	71	277	348		•	\odot	•	2.7	\$19,474	\$15,861
St Luke's Miners	2	30	32		\odot	\odot	\odot	5.1	NR	\$29,090
St Luke's Quakertown	17	43	60	\odot	\odot	\odot	\odot	4.5	\$29,791	\$27,110
St Luke's/Bethlehem	116	263	379	\odot	•	\odot	\odot	3.9	\$19,276	\$19,658
St Mary	45	69	114	\odot	\odot	\odot	\odot	4.4	\$27,976	\$28,924
Suburban General/Pgh	29	47	76	\odot	\odot	\odot	\odot	3.8	\$22,903	\$15,584

○ Lower than expected

• Same as expected

• Higher than expected

NR Too few cases to report

The complications, readmission, and length of stay results account for varying illness levels among patients.

Complications were counted when a deep joint infection or device problem occurred within 365 days, a blood clot occurred within 45 days, and/or a wound infection occurred within 30 days of the surgery. A readmission was counted when a patient was readmitted to an acute care hospital for any reason (except rehabilitation) within 1-30 days of the discharge date of the hospitalization in which the hip or knee replacement was performed. Length of stay is the average number of days spent in the hospital following the surgery.



				Co	omplicatio	ns			Aver Hospital	age Charge
Hospital	Hip Cases	Knee Cases	Total Cases	Deep Joint Infection or Device Problem	Blood Clot Lung/Leg	Wound Infection	Readmission	Post-op Length of Stay	Нір	Knee
Sunbury Community	8	69	77	\odot	\odot	\odot	\odot	3.3	\$19,485	\$17,575
Temple East/Northeastern	12	55	67	\odot		\odot	\odot	4.4	\$35,416	\$37,951
Temple Lower Bucks	16	56	72	\odot	\odot	\odot	\odot	3.6	\$43,709	\$39,389
Temple University	44	90	134		\odot	\odot	\odot	4.8	\$66,542	\$72,293
Thomas Jefferson Univ	992	830	1,822	0		\odot	\odot	3.8	\$39,217	\$46,093
Uniontown	53	134	187	\odot	\odot	\odot	\odot	4.0	\$11,466	\$12,791
United Community	12	47	59	\odot	\odot	\odot	\odot	4.2	\$23,415	\$21,610
UPMC Braddock	21	24	45	\odot	\odot	\odot	\odot	3.4	\$16,776	\$16,664
UPMC Horizon	106	291	397	\odot	\odot	\odot	\odot	4.3	\$17,229	\$16,830
UPMC Lee Regional	53	143	196	\odot	•	\odot	0	3.8	\$21,582	\$22,706
UPMC McKeesport	25	75	100	\odot	\odot	\odot	0	3.5	\$16,406	\$14,480
UPMC Northwest	37	80	117	\odot	\odot	\odot	O	2.9	\$13,960	\$12,734
UPMC Passavant	93	206	299	\odot	\odot	\odot	\odot	3.4	\$21,588	\$22,112
UPMC Presbyterian	38	78	116	\odot	\odot	\odot	\odot	3.5	\$52,565	\$37,386
UPMC Shadyside	249	382	631	\odot	\odot	\odot	\odot	3.7	\$41,635	\$37,946
UPMC South Side	28	94	122	\odot	\odot	\odot	0	3.1	\$19,379	\$16,501
UPMC St Margaret	120	328	448	\odot	\odot	\odot	0	3.9	\$22,771	\$19,523
Warminster	29	62	91	\odot	\odot	\odot	•	3.3	\$56,438	\$61,957
Warren General	33	49	82	\odot	\odot	\odot	\odot	3.9	\$32,466	\$34,609
Washington	82	218	300	\odot	\odot	\odot	\odot	3.4	\$19,195	\$18,620
Wayne Memorial	11	24	35	\odot	\odot	\odot	\odot	5.2	\$22,795	\$23,940
Waynesboro	11	30	41	\odot	\odot	\odot	\odot	3.2	\$16,468	\$16,134
Western Pennsylvania	185	239	424	\odot	\odot	\odot	0	3.6	\$26,988	\$23,967
Westmoreland Regional	85	168	253	\odot	\odot	\odot	\odot	3.8	\$21,308	\$17,477
Williamsport	116	289	405	0	\odot	\odot	\odot	3.3	\$18,100	\$19,853
WVHCS	69	150	219	\odot	•	\odot	\odot	3.9	\$27,003	\$25,561
York	126	270	396	\odot	\odot	•	\odot	3.9	\$14,703	\$15,371

The complications, readmission, and length of stay results account for varying illness levels among patients.

Complications were counted when a deep joint infection or device problem occurred within 365 days, a blood clot occurred within 45 days, and/or a wound infection occurred within 30 days of the surgery. A readmission was counted when a patient was readmitted to an acute care hospital for any reason (except rehabilitation) within 1-30 days of the discharge date of the hospitalization in which the hip or knee replacement was performed. Length of stay is the average number of days spent in the hospital following the surgery.

Lower than expectedSame as expected

• Higher than expected



				Compli	cations	_	
Surgeon	Hip Cases	Knee Cases	Total Cases	Deep Joint Infection or Device Problem	Blood Clot Lung/Leg	Readmission	Post-op Length of Stay
Abraham, William D.	16	24	40	•	\odot	\odot	3.8
Agnew, D. Kelly	17	60	77	\odot	\odot	\odot	3.3
Allardyce, Thomas J.	27	33	60	\odot	\odot	\odot	3.6
Armstrong, Robert	54	94	148	\odot	\odot	\odot	2.6
Avallone, John A.	6	27	33	\odot	\odot	\odot	4.1
Avolio Jr., Armando	15	51	66	\odot	\odot	\odot	4.1
Bailey, John H.	20	43	63	\odot	\odot	\odot	2.9
Baker, David C.	9	38	47			\odot	4.5
Baker, Robert H.	7	24	31	\odot	\odot	\odot	6.8
Balasubramanian, Easwaran	15	58	73	\odot	٠	\odot	4.4
Balog, Balint	16	27	43	\odot	٠	\odot	3.5
Balsamo, Anthony J.	26	54	80	\odot	\odot	\odot	3.3
Baron, Scott L.	33	107	140	\odot	\odot	\odot	3.7
Bartolozzi, Arthur R.	0	64	64	\odot	\odot	\odot	3.5
Batman, Brian A.	6	42	48	\odot	\odot	\odot	3.3
Beachler, John S.	6	25	31	\odot	\odot	\odot	5.2
Becker II, Carl E.	43	49	92	\odot	\odot	\odot	3.5
Beight, John L.	11	30	41	\odot	\odot	\odot	4.0
Benner IV, John H.	17	31	48	\odot	\odot	\odot	4.0
Bennett, Craig H.	0	59	59	\odot	\odot	\odot	2.7
Bhayani, Shabir	10	21	31	\odot	\odot	\odot	3.7
Bisignani, Gregory A.	25	36	61	\odot	\odot	\odot	3.5
Boal, Richard J.	34	46	80	\odot	\odot	\odot	3.9
Bonier, Jerome H.	13	18	31	\odot	\odot	\odot	3.4
Booth Jr., Robert E.	26	567	593	\odot	0	\odot	3.8
Boran Jr., Robert P.	21	50	71	\odot	\odot	0	4.0
Bosacco, David N.	10	34	44	\odot	\odot	\odot	4.6

The complications, readmission, and length of stay results account for varying illness levels among patients.

Lower than expected

• Same as expected

• Higher than expected

Complications were counted when a deep joint infection or device problem occurred within 365 days and/or a blood clot occurred within 45 days of the surgery. A readmission was counted when a patient was readmitted to an acute care hospital for any reason (except rehabilitation) within 1-30 days of the discharge date of the hospitalization in which the hip or knee replacement was performed. Length of stay is the average number of days spent in the hospital following the surgery.

				Complie	cations		
Surgeon	Hip Cases	Knee Cases	Total Cases	Deep Joint Infection or Device Problem	Blood Clot Lung/Leg	Readmission	Post-op Length of Stay
Brockmeyer, Thomas F.	29	93	122	\odot	\odot	\odot	3.7
Bumgardner, James L.	0	37	37	0	\odot	•	4.0
Burrows, Charles B.	35	58	93	\odot	\odot	\odot	3.0
Burton, Paul D.	37	64	101	\odot	\odot	\odot	3.4
Busch, Michael	22	37	59	O	\odot	\odot	3.7
Buseck, Mark S.	18	21	39	\odot	\odot	•	3.1
Butera, Vincent	24	42	66	\odot	\odot	\odot	4.0
Byron, Thomas W.	15	50	65	\odot		\odot	3.8
Caggiano, John D.	12	22	34	\odot	\odot	\odot	3.7
Callenberger, Ronald W.	11	24	35	\odot	\odot	\odot	4.8
Canterna, Anthony C.	3	34	37	\odot	٠	•	2.7
Carey, Patrick J.	0	42	42	\odot	\odot	\odot	4.1
Casey Jr., John D.	16	15	31	\odot	\odot	\odot	3.9
Cautilli, George P.	23	56	79	\odot	\odot	0	3.3
Cesare, Joseph G.	27	69	96	\odot	\odot	\odot	3.5
Cherry, Kenneth L.	105	165	270	0	\odot	\odot	3.2
Chollak, William L.	16	22	38	\odot	\odot	\odot	4.2
Christian, Eugene P.	4	26	30	\odot	\odot	\odot	3.7
Ciccotti, Michael G.	0	34	34	\odot	٠	\odot	4.3
Cohen, David L.	14	23	37	\odot	\odot	\odot	3.9
Cohen, Peter Z.	22	32	54	\odot	\odot	\odot	4.3
Cohen, Robert E.	100	139	239	\odot	\odot	\odot	3.1
Cole Jr., Charles L.	0	167	167	\odot	\odot	\odot	3.1
Conrad, Wayne R.	0	117	117		\odot	\odot	3.7
Cortina, Gary J.	12	27	39		\odot	\odot	3.6
Craft, David V.	12	54	66	\odot	\odot	\odot	3.4
Crossett, Lawrence S.	101	138	239	\odot		\odot	3.7

The complications, readmission, and length of stay results account for varying illness levels among patients.

Complications were counted when a deep joint infection or device problem occurred within 365 days and/or a blood clot occurred within 45 days of the surgery. A readmission was counted when a patient was readmitted to an acute care hospital for any reason (except rehabilitation) within 1-30 days of the discharge date of the hospitalization in which the hip or knee replacement was performed. Length of stay is the average number of days spent in the hospital following the surgery.

 \bigcirc Lower than expected

Same as expected

Higher than expected



				Complications		_	
Surgeon	Hip Cases	Knee Cases	Total Cases	Deep Joint Infection or Device Problem	Blood Clot Lung/Leg	Readmission	Post-op Length of Stay
Cuce, Frank L.	6	24	30	O	\odot	\odot	4.3
D'Antonio, James A.	91	97	188	\odot	\odot	\odot	4.1
D'Arco, Daniel J.	18	34	52	\odot	\odot	\odot	3.4
Dahmus, Robert R.	21	33	54	\odot	\odot	\odot	3.7
Davila, Ramon A.	4	26	30		\odot	\odot	3.1
Davis, Charles M.	45	73	118	\odot	\odot	\odot	2.3
Dearolf III, Walter W.	19	42	61	\odot	\odot	\odot	3.5
DeLong Jr., William G.	16	22	38	\odot	\odot	\odot	4.1
Demuth, William W.	19	20	39		\odot	\odot	3.5
DeVita, Dennis M.	15	31	46	\odot	\odot	\odot	3.5
DiGioia, Anthony M.	160	176	336	0	\odot	0	3.5
Dilorio, Emil J.	7	45	52	\odot	٠	\odot	3.7
DiSimone, Ronald E.	23	62	85	\odot	\odot		2.7
Doherty Jr., John H.	36	63	99	\odot	\odot	\odot	3.7
Dominick, Thomas F.	38	23	61	\odot	\odot	\odot	3.6
Donofrio, Robert J.	19	30	49	\odot	\odot	\odot	4.0
Dragann, Raymond D.	6	40	46	\odot	\odot	\odot	3.7
Elia, Eugene A.	26	53	79	\odot	\odot	\odot	6.4
Ellis, Thomas J.	0	44	44		\odot	\odot	3.2
Ellison, James H.	29	79	108	\odot	\odot	\odot	3.8
Engle, Carolyn P.	12	31	43	\odot	\odot		3.0
Eshbach, Ted B.	13	38	51	\odot	\odot	\odot	3.0
Fanelli, Gregory C.	0	48	48	\odot	\odot	\odot	4.1
Faralli, Victor J.	40	89	129	\odot	\odot	\odot	3.6
Fessler, Thomas J.	34	44	78		\odot	\odot	3.3
Fowler, David P.	17	43	60	\odot	\odot	\odot	3.7
Frankeny II, John R.	21	44	65		\odot	\odot	3.5

The complications, readmission, and length of stay results account for varying illness levels among patients.

Lower than expected

• Same as expected

• Higher than expected

Complications were counted when a deep joint infection or device problem occurred within 365 days and/or a blood clot occurred within 45 days of the surgery. A readmission was counted when a patient was readmitted to an acute care hospital for any reason (except rehabilitation) within 1-30 days of the discharge date of the hospitalization in which the hip or knee replacement was performed. Length of stay is the average number of days spent in the hospital following the surgery.

				Compli	cations		
Surgeon	Hip Cases	Knee Cases	Total Cases	Deep Joint Infection or Device Problem	Blood Clot Lung/Leg	Readmission	Post-op Length of Stay
Fritz, William D.	13	46	59	•	\odot	\odot	2.5
Frndak, Philip A.	57	136	193	\odot	\odot	\odot	2.8
Fulchiero, Gregory J.	19	44	63	•	\odot	\odot	3.2
Fultz, Craig W.	10	59	69	\odot	\odot	\odot	3.7
Gaffney, Michael B.	10	25	35	•	\odot	\odot	4.6
Gardner, Stuart A.	8	28	36	\odot	\odot	\odot	4.1
Garino, Jonathan P.	113	36	149		\odot	\odot	3.8
Gehl, Richard S.	12	22	34		\odot	\odot	4.3
Giammattei, Frank P.	39	119	158	\odot	\odot	\odot	3.5
Giannotti, Bradley F.	18	45	63	\odot	\odot	\odot	3.4
Gillick, Alan P.	17	22	39	\odot	\odot	\odot	4.0
Gingrich, Kevin A.	10	29	39	\odot	\odot	\odot	2.9
Godbout, Brett P.	10	30	40	\odot	٠	\odot	3.6
Good, Robert P.	81	151	232	\odot	\odot	\odot	3.6
Goodman, Mark A.	11	21	32	\odot	\odot	\odot	4.3
Gordon, Stuart L.	20	56	76	\odot	\odot	\odot	3.5
Gottwald, Dan H.	12	22	34	•	\odot	\odot	3.7
Graham, Timothy S.	8	27	35	\odot	\odot	\odot	4.4
Green, Thomas J.	7	28	35	•	\odot	\odot	4.0
Greene, Thomas E.	8	23	31		\odot	\odot	4.2
Groff, Steven K.	9	27	36	•	\odot	\odot	4.6
Gunnlaugson, Brian E.	39	82	121	•	\odot	\odot	3.5
Haffner, Daniel L.	12	24	36	•	\odot	\odot	4.1
Hallock, Richard H.	27	90	117	•	\odot	\odot	3.1
Hanks, Gregory A.	7	25	32	•	\odot	\odot	3.7
Harner, Christopher D.	0	64	64	•	\odot	\odot	2.5
Hartmann, David B.	17	50	67	\odot	\odot	\odot	3.8

The complications, readmission, and length of stay results account for varying illness levels among patients.

Complications were counted when a deep joint infection or device problem occurred within 365 days and/or a blood clot occurred within 45 days of the surgery. A readmission was counted when a patient was readmitted to an acute care hospital for any reason (except rehabilitation) within 1-30 days of the discharge date of the hospitalization in which the hip or knee replacement was performed. Length of stay is the average number of days spent in the hospital following the surgery.

Lower than expected

- Same as expected
- Higher than expected



				Compli	cations		
Surgeon	Hip Cases	Knee Cases	Total Cases	Deep Joint Infection or Device Problem	Blood Clot Lung/Leg	Readmission	Post-op Length of Stay
Harvey, Charles J.	39	5	44	O	\odot	\odot	3.2
Hawk, Gregor M.	12	27	39	O	\odot	\odot	2.8
Hely, Daniel P.	16	38	54		\odot	\odot	4.0
Hennessey, Barry J.	22	28	50	\odot	\odot	\odot	4.5
Henzes, Jack	19	84	103	\odot	\odot	\odot	3.5
Heppenstall, R. Bruce	11	25	36	\odot	\odot	\odot	3.8
Herbert, Rex A.	19	52	71	\odot	\odot	\odot	4.0
Hershock, Bruce A.	14	19	33	\odot	\odot	\odot	4.2
Hill, Edward B.	11	42	53	\odot	\odot	\odot	4.3
Hirsch, Bernard	12	23	35	\odot	\odot	\odot	3.9
Hofmann, Douglas J.	24	24	48	\odot	\odot	\odot	3.3
Honkala, Timothy K.	31	41	72	\odot	\odot	\odot	3.7
Horwitz, Brett R.	10	20	30	\odot	\odot	\odot	4.2
Hottenstein, Jonathan E.	55	75	130	\odot	\odot	\odot	3.8
Hozack, William J.	364	179	543	0	\odot	\odot	3.4
Hribar, Stephen R.	9	21	30		\odot	\odot	3.7
Hughes, David P.	18	33	51		\odot	\odot	3.5
Hume, Eric L.	65	122	187	\odot	\odot	\odot	3.8
Hung, Gregory L.	25	47	72	\odot	\odot	\odot	3.7
Hussain, Shabbar	9	22	31	\odot	\odot	\odot	3.7
laleggio, John J.	16	37	53	\odot	٠	\odot	3.9
Israelite, Craig	31	83	114	\odot	\odot	\odot	3.5
Janeway, Timothy	22	40	62	\odot	٠	\odot	3.6
Jason, William J.	7	35	42	\odot	\odot	\odot	3.9
Jenter, Martin W.	6	47	53	\odot	\odot	\odot	2.9
Jewell, Brian F.	13	33	46	\odot	\odot	\odot	3.5
Johanson, Norman A.	41	78	119	\odot	\odot		4.0

The complications, readmission, and length of stay results account for varying illness levels among patients.

Lower than expected

• Same as expected

Higher than expected

Complications were counted when a deep joint infection or device problem occurred within 365 days and/or a blood clot occurred within 45 days of the surgery. A readmission was counted when a patient was readmitted to an acute care hospital for any reason (except rehabilitation) within 1-30 days of the discharge date of the hospitalization in which the hip or knee replacement was performed. Length of stay is the average number of days spent in the hospital following the surgery.



				Compli	cations		
Surgeon	Hip Cases	Knee Cases	Total Cases	Deep Joint Infection or Device Problem	Blood Clot Lung/Leg	Readmission	Post-op Length of Stay
Johe, David H.	19	54	73	O		\odot	2.8
Johnson, Van W.	19	22	41	\odot	\odot	\odot	4.0
Johnson, William J.	11	27	38	\odot	\odot	\odot	3.6
Johnstone, Graham F.	12	37	49	\odot	\odot	\odot	3.3
Jones, Frederick L.	23	47	70	O	\odot	\odot	4.7
Jones, Thomas B.	16	48	64	O	\odot	\odot	3.9
Jules, Arnold J.	15	19	34	\odot	\odot	\odot	5.1
Kaneda, Robert R.	27	56	83	\odot	\odot	\odot	3.3
Kappakas, George S.	26	47	73	\odot	\odot	\odot	3.6
Kastrup, John J.	16	37	53	\odot	\odot	\odot	3.0
Kates, Jonathan L.	9	22	31	\odot	\odot	\odot	4.8
Katz, lan	14	27	41	\odot	\odot	\odot	4.4
Kaye, Andrew S.	10	43	53			\odot	3.9
Keblish Jr., Peter A.	50	79	129	•	\odot	\odot	3.3
Keller, Greg S.	4	33	37	\odot	\odot	\odot	3.8
Kelly, Edward G.	40	72	112	\odot	\odot	\odot	3.8
Kennen, E. William	19	95	114	\odot	\odot	•	3.4
Kohl, E. James	13	20	33	\odot	\odot	\odot	3.6
Kolessar, David J.	23	48	71	\odot	\odot	\odot	3.4
Kozicky, Peter W.	34	44	78	\odot		\odot	4.3
Krum, Seth D.	8	24	32	\odot	\odot	\odot	2.8
Krywicki, William J.	42	87	129	\odot	\odot	\odot	3.8
Larkin, Michael J.	13	49	62	0	\odot	\odot	3.5
Larson, Thomas J.	29	44	73	\odot	\odot	\odot	3.7
Lauro, Gregory R.	37	91	128	\odot	\odot	\odot	3.2
Leggon, Robert E.	19	12	31	•		\odot	4.8
Lehman, John D.	20	36	56	0	\odot	\odot	3.9

The complications, readmission, and length of stay results account for varying illness levels among patients.

Complications were counted when a deep joint infection or device problem occurred within 365 days and/or a blood clot occurred within 45 days of the surgery. A readmission was counted when a patient was readmitted to an acute care hospital for any reason (except rehabilitation) within 1-30 days of the discharge date of the hospitalization in which the hip or knee replacement was performed. Length of stay is the average number of days spent in the hospital following the surgery.

O Lower than expected

- Same as expected
- Higher than expected



				Compli	cations		
Surgeon	Hip Cases	Knee Cases	Total Cases	Deep Joint Infection or Device Problem	Blood Clot Lung/Leg	Readmission	Post-op Length of Stay
Leslie Jr., Merle R.	8	27	35	O	\odot	\odot	4.0
Levine, Michael	42	80	122	\odot	\odot	\odot	3.8
Liefeld, Paul A.	18	42	60	\odot	\odot	\odot	3.2
Lillmars, Steven A.	16	39	55	\odot	\odot	\odot	3.6
Lippe, Ronald W.	53	149	202	\odot	\odot	\odot	3.6
Litton, Jason J.	10	26	36	\odot	\odot	\odot	3.5
Lonergan, Robert P.	11	45	56		٠	\odot	4.9
Longenecker, Stephen C.	47	117	164	\odot	\odot	0	3.4
Lonner, Jess H.	26	77	103	\odot	\odot	\odot	4.0
Lorei, Matthew P.	33	62	95		\odot		4.7
Lotke, Paul A.	32	153	185	\odot	\odot	\odot	4.2
Lowry, Don A.	15	43	58	\odot	\odot	\odot	4.4
Lyet, J. Paul	76	0	76	\odot	\odot	\odot	3.6
Mackell, Thomas E.	20	27	47	\odot	\odot	\odot	2.8
Maggitti, Michael J.	8	22	30	\odot	\odot	\odot	4.0
Malloy, Edwin	17	24	41	\odot	\odot		4.7
Mannherz, Robert E.	1	30	31	\odot	\odot	\odot	3.2
Markmann, William J.	39	75	114	\odot	٠	\odot	4.0
Mason, Gregg C.	22	34	56	\odot	\odot	\odot	3.2
Mauriello Jr., Anthony J.	15	46	61	•	\odot	•	3.0
McCarthy III, John J.	30	50	80	\odot	\odot	\odot	4.3
McClain III, Edward J.	26	47	73	\odot	\odot	\odot	4.2
McKirgan, Craig C.	9	23	32	\odot	\odot	\odot	3.4
McPhilemy, John J.	6	28	34	\odot	\odot	\odot	4.6
Meade, Thomas D.	9	43	52	\odot	\odot	\odot	3.3
Mehok, Ronald G.	26	50	76	\odot	\odot	\odot	3.8
Menkowitz, Bruce J.	21	115	136	•	\odot	\odot	3.6

The complications, readmission, and length of stay results account for varying illness levels among patients.

Lower than expected

• Same as expected

Higher than expected

Complications were counted when a deep joint infection or device problem occurred within 365 days and/or a blood clot occurred within 45 days of the surgery. A readmission was counted when a patient was readmitted to an acute care hospital for any reason (except rehabilitation) within 1-30 days of the discharge date of the hospitalization in which the hip or knee replacement was performed. Length of stay is the average number of days spent in the hospital following the surgery.



				Compli	cations		
Surgeon	Hip Cases	Knee Cases	Total Cases	Deep Joint Infection or Device Problem	Blood Clot Lung/Leg	Readmission	Post-op Length of Stay
Michael, Stanley P.	8	25	33	\odot	\odot	\odot	5.2
Miller Jr., Ivan L.	13	25	38	•	\odot	\odot	3.0
Miller, Curt D.	17	34	51		\odot	\odot	4.6
Miller, Lawrence S.	0	39	39	\odot	\odot	\odot	3.8
Miller, Michael D.	69	187	256	\odot	\odot	0	3.3
Mitrick, Michael F.	30	51	81	\odot	\odot	\odot	3.3
Mogerman, Jeffrey A.	12	25	37	\odot	\odot	\odot	3.6
Moritz, Michael J.	15	21	36	\odot	\odot	\odot	3.4
Moses, J. Michael	24	63	87	\odot	\odot	\odot	4.0
Mutschler, Thomas A.	83	101	184	\odot	\odot	\odot	3.7
Nazar, Jose E.	24	60	84	\odot	\odot	\odot	3.6
Nazarian, David G.	263	175	438	0	\odot	\odot	3.6
Nelson, Charles L.	62	69	131	0	\odot	\odot	3.9
Nelson, Owen A.	34	70	104	0	\odot	\odot	3.9
Neuschwander, David C.	0	39	39	0	\odot	\odot	3.9
Nevulis, John J.	13	21	34	0	\odot	\odot	4.2
Nord, D. Scott	10	22	32	O	\odot	0	3.5
O'Brien III, Frank D.	10	25	35	O	\odot	0	3.7
O'Malley Jr., Donald F.	18	37	55	O	\odot	\odot	3.9
O'Neill, James P.	17	26	43	0	\odot	O	3.9
Pan, Edward L.	13	55	68		\odot	\odot	3.5
Papas, Spiro N.	9	30	39	0	\odot	\odot	4.1
Parenti, John M.	14	16	30	O	\odot	\odot	3.5
Parrish, William M.	40	46	86	O	\odot	0	2.4
Patney, Michael J.	9	29	38	•	\odot	\odot	2.7
Pell, John J.	22	36	58	O	\odot	\odot	4.4
Piasio, Mark A.	13	24	37	•	\odot	\odot	4.1

The complications, readmission, and length of stay results account for varying illness levels among patients.

Complications were counted when a deep joint infection or device problem occurred within 365 days and/or a blood clot occurred within 45 days of the surgery. A readmission was counted when a patient was readmitted to an acute care hospital for any reason (except rehabilitation) within 1-30 days of the discharge date of the hospitalization in which the hip or knee replacement was performed. Length of stay is the average number of days spent in the hospital following the surgery.

Lower than expected

Same as expected

Higher than expected



				Compli	cations	_	
Surgeon	Hip Cases	Knee Cases	Total Cases	Deep Joint Infection or Device Problem	Blood Clot Lung/Leg	Readmission	Post-op Length of Stay
Pifer, Gerald W.	12	53	65	•	\odot	\odot	4.4
Piston, Robert W.	50	112	162	\odot	\odot	\odot	3.6
Polacheck Jr., William J.	21	48	69	\odot	\odot	\odot	3.6
Polintan, Rodolfo	19	30	49	\odot	\odot	\odot	3.9
Pollice, Paul F.	50	53	103	\odot	\odot	\odot	3.7
Poon, Edward D.	19	40	59	\odot	\odot	\odot	3.8
Port, Joshua	0	110	110	\odot	\odot	\odot	3.1
Puglisi, Anthony S.	10	30	40	\odot	\odot	\odot	2.6
Puleo, Samuel M.	20	56	76	\odot	\odot	\odot	4.3
Purtill, James J.	39	48	87	\odot	\odot	\odot	3.9
Rackish, Mark A.	56	27	83	\odot	\odot	\odot	3.3
Raklewicz, Michael C.	17	46	63	\odot	\odot	\odot	3.7
Ray, Richard L.	25	80	105	\odot	\odot	\odot	4.9
Reese, Evan C.	17	16	33	\odot	\odot	\odot	3.6
Reid, James H.	10	20	30	\odot	٠	\odot	3.2
Renz, Thomas J.	25	32	57	\odot	\odot	\odot	3.5
Resnick, Paul H.	17	70	87	\odot	\odot	\odot	3.9
Respet, Patrick B.	15	22	37	\odot	\odot	\odot	3.3
Richards Jr., Robert N.	20	26	46	\odot	\odot		4.0
Ripepi, Vincent J.	11	28	39	\odot	\odot		3.3
Robertson, Roger J.	31	70	101	\odot	\odot	\odot	4.0
Rodgers, John C.	14	31	45	\odot	\odot	\odot	3.9
Roeshot, Douglas E.	38	40	78	\odot	\odot	\odot	3.6
Rogal, Michael J.	26	62	88	\odot	\odot	\odot	3.7
Rogers, Vincent P.	33	119	152	\odot	\odot	\odot	2.9
Rogusky, Edwin J.	14	19	33	\odot	•	\odot	3.3
Rothacker Jr., Gerald W.	34	61	95	\odot	\odot	\odot	3.3

The complications, readmission, and length of stay results account for varying illness levels among patients.

Lower than expected

• Same as expected

Higher than expected

Complications were counted when a deep joint infection or device problem occurred within 365 days and/or a blood clot occurred within 45 days of the surgery. A readmission was counted when a patient was readmitted to an acute care hospital for any reason (except rehabilitation) within 1-30 days of the discharge date of the hospitalization in which the hip or knee replacement was performed. Length of stay is the average number of days spent in the hospital following the surgery.

				Compli	cations		
Surgeon	Hip Cases	Knee Cases	Total Cases	Deep Joint Infection or Device Problem	Blood Clot Lung/Leg	Readmission	Post-op Length of Stay
Rothenberg, Mitchell H.	8	32	40	0	\odot	\odot	3.4
Rothman, Richard H.	346	210	556	\odot	\odot	\odot	4.1
Rubbo, Ernest R.	7	24	31	\odot	\odot	\odot	3.6
Rubin, Jeffry F.	57	47	104	\odot	\odot	\odot	3.6
Ruggiero, Robert A.	31	90	121	\odot	\odot	\odot	3.0
Ruht, Barry A.	21	50	71	\odot	\odot	\odot	3.2
Ruth, Robert M.	18	16	34	\odot	\odot	\odot	3.7
Rychak, John S.	17	62	79	\odot	\odot	\odot	3.8
Sachdev, Ranjan	36	39	75	\odot	\odot	\odot	4.0
Scarpino, Leo J.	48	81	129	•	\odot	0	3.4
Schaaf, H. William	25	35	60	•	\odot	\odot	4.4
Schmaltz, Harry W.	51	121	172	•	\odot	\odot	3.6
Schroeder, Richard D.	16	37	53		•	\odot	4.8
Scornavacchi Jr., Joseph M.	33	93	126	•	\odot	\odot	3.6
Scullin III, John P.	33	63	96	•	\odot	0	4.3
Sharkey, Peter F.	178	228	406	O	•	0	3.7
Shatouhy, Joseph	9	33	42	•	\odot	O	2.8
Sicuranza, Michael J.	6	44	50	•	\odot	0	4.4
Sieger, David D.	12	19	31	•	\odot	\odot	3.9
Simmons Jr., Cheston	20	26	46	•	\odot	\odot	3.7
Singer, Robert J.	7	35	42	•	\odot	\odot	3.7
Sinha, Raj K.	40	44	84	•	\odot	\odot	3.4
Smith, Donald B.	22	40	62	•	\odot	\odot	3.3
Smith, Gary L.	26	41	67	•	\odot	\odot	4.1
Smith, Jack D.	24	49	73	•	\odot	\odot	3.8
Smith, Stephen H.	9	30	39	•	\odot	\odot	4.3
Soffer, Stephen R.	10	42	52	\odot	\odot	\odot	4.0

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○ Lower than expected

- Same as expected
- Higher than expected



				Compli	cations	_	
Surgeon	Hip Cases	Knee Cases	Total Cases	Deep Joint Infection or Device Problem	Blood Clot Lung/Leg	Readmission	Post-op Length of Stay
Sotereanos, Nicholas G.	75	114	189	O		\odot	4.6
Sotos, Lazaros N.	10	29	39	\odot	\odot	\odot	3.5
Spingola, Charles E.	18	24	42	\odot	\odot	\odot	3.6
Stabler, Craig L.	1	63	64	\odot	\odot	\odot	3.7
Stapor, David J.	27	48	75	\odot	\odot	\odot	4.1
Star, Andrew M.	60	86	146	\odot	\odot	\odot	3.9
Steele, John F.	34	106	140	\odot	\odot	\odot	4.0
Stefanovski, Nick	16	31	47	\odot	\odot	\odot	3.3
Stelmach, John P.	67	203	270	\odot	\odot	\odot	2.5
Stracci, Joseph P.	9	40	49	\odot	\odot	\odot	3.8
Straley, Richard K.	12	44	56	\odot	\odot	\odot	3.4
Suarez, Paul A.	15	21	36	\odot	\odot	\odot	2.9
Suprock, Mark D.	40	135	175		\odot	\odot	2.9
Sutherland, Robert D.	11	41	52	\odot	\odot	\odot	3.5
Sybing, Eugenio A.	7	25	32	\odot	\odot	\odot	4.8
Terefenko, Kevin M.	19	38	57	\odot	\odot	\odot	4.0
Theis, Steven W.	31	101	132	\odot	\odot	\odot	3.3
Thomas, Stephen J.	25	52	77	\odot	\odot	\odot	4.0
Thomas, Victor J.	28	53	81	\odot	\odot	\odot	3.3
Thompson, John	11	34	45	\odot	\odot	\odot	3.3
Tomaszewski, Theodore J.	11	24	35	\odot	\odot	\odot	3.2
Tranovich, Michael A.	6	35	41	O	\odot	\odot	3.4
Triantafyllou, Steven J.	11	19	30	•	\odot	\odot	3.5
Tripi, Joseph E.	8	24	32	\odot	\odot	\odot	3.4

The complications, readmission, and length of stay results account for varying illness levels among patients.

- Lower than expected
- Same as expected
- Higher than expected

Complications were counted when a deep joint infection or device problem occurred within 365 days and/or a blood clot occurred within 45 days of the surgery. A readmission was counted when a patient was readmitted to an acute care hospital for any reason (except rehabilitation) within 1-30 days of the discharge date of the hospitalization in which the hip or knee replacement was performed. Length of stay is the average number of days spent in the hospital following the surgery.

				Complications			
Surgeon	Hip Cases	Knee Cases	Total Cases	Deep Joint Infection or Device Problem	Blood Clot Lung/Leg	Readmission	Post-op Length of Stay
Tymon, Timothy P.	0	31	31	\odot	\odot	\odot	3.5
Vangiesen, Peter J.	16	42	58	\odot	\odot	\odot	4.0
Vena, Vincent E.	14	33	47	\odot	\odot	\odot	4.1
Vernace, Joseph V.	36	74	110	\odot	\odot	\odot	3.5
Ververeli, Prodromos A.	87	138	225	0	\odot	\odot	2.8
Weidner, Paul L.	77	121	198	\odot	\odot	\odot	3.5
Weiss Jr., Carl B.	18	65	83	\odot	\odot	\odot	3.7
Weiss, Michael W.	13	49	62	\odot	\odot	\odot	3.4
Weiss, Robert F.	13	43	56	\odot	\odot	\odot	4.0
Westphal, Thomas R.	4	69	73	\odot	\odot	\odot	3.0
Wheeler, Thomas B.	5	32	37		\odot	\odot	5.2
Wigle, A. Roger	13	25	38	\odot	\odot	\odot	3.3
Williams Jr., John T.	42	78	120	\odot	\odot	\odot	2.7
Williams, John M.	12	32	44	\odot	\odot	\odot	3.7
Williams, Mark S.	14	38	52	\odot	\odot	\odot	2.8
Wolf, Laurence R.	41	42	83	\odot	\odot	\odot	4.1
Wolfgang, Gary L.	81	91	172	\odot	\odot	\odot	4.0
Worrall, Vernon T.	24	87	111	\odot	\odot	\odot	3.9
Yakish, Samuel D.	25	51	76	\odot		\odot	3.8
Yanoff, David B.	9	24	33	\odot	\odot	\odot	3.0
Zartman, Gary M.	30	60	90	\odot	•	\odot	3.8
Zurbach, James M.	9	27	36	\odot	\odot		4.1

The complications, readmission, and length of stay results account for varying illness levels among patients.

Complications were counted when a deep joint infection or device problem occurred within 365 days and/or a blood clot occurred within 45 days of the surgery. A readmission was counted when a patient was readmitted to an acute care hospital for any reason (except rehabilitation) within 1-30 days of the discharge date of the hospitalization in which the hip or knee replacement was performed. Length of stay is the average number of days spent in the hospital following the surgery.



Hospitals with fewer than 30 cases (hip and knee combined).

Hospital	Hip Cases	Knee Cases	Total Cases
Ashland Regional	1	3	4
Berwick	7	19	26
Brookville	9	12	21
Corry Memorial	7	14	21
Hazleton St Joseph	5	6	11
Highlands	3	10	13
Hospital Fox Chase Cancer	5	0	5
Jennersville Regional	13	12	25
Jersey Shore	5	13	18
Kane Community	12	16	28
Mercy Philadelphia	10	11	21
Mercy Providence	7	16	23
Methodist Division/TJUH	6	10	16
Millcreek Community	6	11	17
Miners	1	3	4
Palmerton	13	12	25
Philipsburg Area	5	13	18
Punxsutawney Area	7	10	17
St Agnes	3	11	14
St Joseph's/Philadelphia	4	6	10
Titusville Area	12	17	29
Tyler Memorial	6	7	13
Tyrone	2	4	6
Windber	7	17	24

Surgoon	Hip	Knee	Total
Alabardi lask		Cases	Lases
	1	0	1
Abranam, David J.	4	0	4
Adolph, Carl M.	3	4	/
Aita, Daren J.	2	2	4
Aksu, Kenan	0	3	3
Aland, Christopher M.	0	3	3
Altman, Daniel T.	9	7	16
Amalfitano, Thomas G.	3	17	20
Andreychik, David A.	16	10	26
Antin, Mitchell E.	8	10	18
Avallone Jr., Vincent R.	4	24	28
Avart, Mark D.	0	4	4
Babins, David M.	15	13	28
Balduini, Frederick C.	0	18	18
Ball, David J.	3	24	27
Banas, Michael P.	7	7	14
Barnes, Frederick J.	17	12	29
Bartolet, Terry L.	0	5	5
Barua, Subrata P.	0	4	4
Basile, Joseph A.	2	3	5
Beck, Thomas D.	3	16	19
Bell, Lawrence D.	5	9	14
Berger, Winfried M.	2	3	5
Berman, Arnold T.	9	18	27
Bixler, Brian L.	0	14	14
Bizousky, David T.	4	4	8
Black, Jonathan D.	3	3	6
Bleday, Raymond M.	3	5	8
Bloomstine, Mark T.	8	13	21
Born, Christopher T.	6	16	22
Bosacco, Stephen J.	5	2	7
Boylan, Douglas N.	0	5	5
Boyle, Scott J.	6	18	24
Bradley, James P.	0	23	23
Brigham, Mark P.	3	3	6
Brody, Leonard A.	6	15	21
Brogle, Patrick J.	3	3	6
Bromberg, Jonathan	2	5	7
Bruno, Anthony	3	11	14
Burke III, Charles J.	6	21	27
Butterfield, Spencer L.	4	7	11
Carson, James H.	9	15	24

Surgeon	Hip Cases	Knee Cases	Total Cases
Caucci, David	2	2	4
Cecchini, Albert J.	0	1	1
Cerciello, Mark J.	1	12	13
Charlton, William P.	2	4	6
Chiavacci, Eugene J.	8	19	27
Chidester, John H.	4	11	15
Christiansen, Gregory B.	0	15	15
Chu, Constance R.	1	11	12
Clabbers, Kim Marie	2	7	9
Cohen, Martin A.	2	2	4
Coleman, Martin R.	1	0	1
Collier Jr., Andrew J.	3	8	11
Connolly, Thomas C.	4	8	12
Cooke, Christopher C.	5	5	10
Cooper, Alan E.	5	20	25
Cooper, Mitchell E.	2	0	2
Corcoran, Thomas A.	4	19	23
Coyle, Alice R.	3	3	6
Cronkey, Joseph E.	11	10	21
D'Agata, Samuel D.	0	29	29
Dailey, Stephen W.	2	4	6
Davis, Steven S.	5	13	18
Dawson, Michael H.	3	0	3
Deforno, Donald J.	1	2	3
Demeo, Patrick J.	0	1	1
Dethoff, John C.	9	16	25
Dinsmore Jr., Harry H.	1	2	3
DiStefano, Vincent J.	3	4	7
Ditmars, Douglas D.	8	12	20
Diverio Jr., Donald D.	2	10	12
Dolecki, Michael	11	14	25
Donthineni-Rao, Rakesh	0	2	2
Duch, Michael R.	1	0	1
Eagle, Perry A.	0	1	1
Ecker, Malcolm L.	8	12	20
Eingorn, David S.	3	2	5
Emper, William D.	0	18	18
Esterhai Jr., John L.	2	0	2
Evans, Charles M.	2	4	6
Evans, Eric T.	7	17	24
Falatyn, Stephen P.	1	0	1
Federico, Dale J.	0	1	1

Surgoon	Hip	Knee	Total
Surgeon	Cases	12	10
Feinstein, Peter A.	0	12	- 18
Ferretti Jr., Antnony	4	4	8
Ferretti, Antnony J.	2	8	10
Fink, Bradley A.	2	1	3
Ford, Edward J.	2	3	5
Foster, Mark R.	3	2	5
Frame, David C.	7	18	25
Frankel, Andrew S.	17	11	28
Frederick, Robert W.	0	1	1
Freedman, Kevin B.	1	0	1
Friedman, Robert L.	3	9	12
Friedman, Shep J.	2	6	8
Frieman, Barbara G.	0	9	9
Fugate, Douglas S.	4	4	8
Gallant, Gregory G.	1	4	5
Gause, Trenton M.	11	14	25
Gavin Jr., J. Robert	8	17	25
German, David J.	8	8	16
Ghigiarelli, Christopher C.	0	2	2
Gibbons, John M.	3	10	13
Gick, Stephen A.	5	22	27
Girdany, David S.	6	11	17
Girton, Keith E.	2	0	2
Glasso Jr., Louis C.	8	17	25
Go Jr., William C.	1	2	3
Gokcen, Eric C.	0	1	1
Golobek, Donald	6	3	9
Gordon, Rodney G.	1	0	1
Grabias Jr., Stanley L.	5	18	23
Grob, Robert B.	2	12	14
Groff, Yram J.	1	3	4
Gruen, Gary S.	2	0	2
Guagliardo, Joseph P.	2	5	7
Guastavino, Thomas D.	4	14	18
Haas, Myron D.	7	13	20
Hahn, Jonathan F.	19	0	19
Hamilton, William C.	5	6	11
Hammond III, N. Lerov	5	4	9
Hamsher, James R.	11	11	22
Hasbach, Thomas J.	11	11	22
Haus, Mary M.	0	11	11
Heidenreich Jr., Fred P.	6	13	19

Surgeon	Hip Cases	Knee Cases	Total Cases
Heintz, James J.	10	8	18
Helmold, Karl W.	3	4	7
Hibberd, Alan E.	9	3	12
Himmelwright, Brett A.	0	25	25
Hoffman, James K.	8	17	25
Hootman, Barry D.	2	22	24
Horenstein, Paul A.	4	18	22
Hubbard Jr., Charles J.	7	13	20
Hummer III, Charles D.	7	19	26
Huxster, Robert H.	1	13	14
Ignatius, Paul F.	2	5	7
Irwin, John T.	4	9	13
Jaeger, Randy	0	23	23
Jelen Jr., Joseph A.	2	8	10
Jeng, Clifford L.	4	7	11
Jurenovich, Michael J.	1	5	6
Kalenak, Alexander	0	4	4
Kann, Jeffrey N.	0	11	11
Kapcala, Jan S.	1	1	2
Keenan, Mary Ann	1	3	4
Kilkelly, Francis X.	0	2	2
Kim, Eugene D.	2	3	5
Klein, Alan H.	13	15	28
Kovalsky, Don A.	1	2	3
Kovalsky, Evan S.	1	5	6
Krajeski, R. Drew	8	12	20
Kramer, Thomas D.	11	16	27
Krot, Alexander	12	15	27
Kuklinski, Lawrence M.	5	21	26
Kunkle, Herbert L.	6	13	19
Lackman, Richard D.	1	8	9
Langhans, Mark J.	14	15	29
Laurencin, Cato T.	3	5	8
Lease, John R.	3	1	4
Lesh, Mark L.	9	10	19
Levin, Gene D.	9	10	19
Levy, Jon A.	11	9	20
Liss, Robert G.	13	0	13
Little, Thomas A.	0	3	3
Luchetti, Wayne T.	1	8	9
Lupo, Robert A.	11	10	21
Lyons, Christopher J.	12	11	23

Surgoon	Hip	Knee	Total
Surgeon	Cases	Lases	Cases
Lyons, John C.	5	17	
Maclelak, James R.	1	0	12
Mackell Jr., James V.	2	10	12
MacPhail, John	3	12	15
Maley, Edward D.	2	15	1/
Malumed, Jeffrey	0	8	8
Mancuso, Christopher J.	2	0	2
Mandarino, Michael J.	2	8	10
Mansmann, Kevin A.	5	7	12
Manta, John P.	1	9	10
Manzione, Marc	1	4	5
Marchinski, Leonard J.	6	8	14
Marcus, Andrew J.	6	4	10
Martin Jr., John A.	0	17	17
Martin, James S.	4	16	20
Martin, Thomas L.	1	5	6
Martinez, Zeferino	8	20	28
Mathews, Robert S.	2	2	4
Mattucci Jr., James M.	0	1	1
Mazur, Donald W.	2	4	6
McGann, Robert D.	9	12	21
McGlynn, James T.	5	17	22
McGuire, Daniel T.	1	4	5
McHugh, Dennis P.	1	15	16
McMaster, James H.	10	19	29
McWhirter, William R.	2	15	17
Mears, Dana C.	3	2	5
Mehm, Joseph W.	8	20	28
Meller, Menachem M.	4	9	13
Mendez, Armando A.	4	11	15
Menio, Gregory J.	8	9	17
Mino, David E.	3	0	3
Mira, Allan J.	8	15	23
Mitchell, Eric I.	4	6	10
Mitchell, William J.	1	2	3
Moran Jr., Theodore R.	3	12	15
Mulholland, Jeffrey B.	0	12	12
Muller, Gary W.	6	21	27
Muser, Daniel E.	4	4	8
Muzzonigro, Thomas S.	2	6	8
Mystakas, Fotis G.	7	14	21
Nabors, Eric D.	5	11	16
inapors, Eric D.	5	11	16

Surgeon	Hip Cases	Knee Cases	Total Cases
Nachtigall, Dean A.	9	15	24
Nappi, Dominic F.	0	3	3
Nartatez, Mark A.	6	19	25
Nettrour, Lewis F.	5	7	12
Neuman, Paul C.	3	1	4
Nolan Jr., John P.	1	2	3
Nutt III, James N.	8	9	17
O'Brien, Brendan J.	1	3	4
O'Brien, Evan D.	0	1	1
Odgers IV, Charles J.	1	0	1
Okin, E. Michael	0	17	17
Oliveri, Marcelino P.	0	3	3
Oronoz Jr., Joaquin F.	5	3	8
Overholt, David J.	8	7	15
Palmaccio, Anthony J.	2	3	5
Pashman, David R.	2	7	9
Patterson, Donald A.	6	6	12
Peff, Thomas C.	1	6	7
Pellegrini Jr., Vincent D.	14	5	19
Perlmutter, Mark N.	3	6	9
Perry III, John F.	1	2	3
Petolillo Jr., John	1	4	5
Philippon, Marc J.	27	0	27
Polidora, Frank C.	14	15	29
Pollack, Lawrence S.	5	14	19
Pollock, Michael S.	5	7	12
Powers, Brian A.	9	9	18
Primiano, George A.	1	7	8
Propst-Proctor, Sandra	7	9	16
Puccio, Steven T.	7	3	10
Pullekines, Joseph W.	13	14	27
Puri, Lalit	2	8	10
Pushkarewicz, Michael J.	13	12	25
Rees, David B.	7	22	29
Reigel, Craig A.	2	0	2
Reinhardt, David E.	1	4	5
Rhodes, Anthony L.	1	7	8
Richman, Jory D.	8	0	8
Ridella, P. James	9	15	24
Rinker, R. James	8	8	16
Ritz, George	5	16	21
Rogers, Jonathan J.	3	6	9

Surgoon	Hip	Knee	Total
Posopfold Karl	Cases	17	22
Rosenfeld Renald N	2	17	11
Roseniela, Ronala W	۲ ۲	16	21
Rowe, Angela W.	5	10	21
Rubin, Morton L.	4		20
Ruggiero Jr., Robert A.	/ 	2	12
Rutter, Chad M.	5	3	8
Ryscavage, Thomas S.	4	6	10
Sacchetti, Mario P.	6	15	21
Sachs, Ira C.	4	15	19
Salvo, John P.	5	6	11
Schmidt, Richard G.	10	1	11
Schrantz, William F.	0	2	2
Schwartz, Todd D.	11	18	29
Searfoss, Rodger C.	8	12	20
Sebastianelli, Wayne J.	2	9	11
Seel, Michael J.	8	20	28
Sewecke, Jeffrey J.	9	15	24
Shakil, Mohammed S.	0	4	4
Sharps, Lewis S.	8	19	27
Shilling, Jack W.	12	10	22
Silver, Barry A.	0	6	6
Simonelli, Paul M.	5	18	23
Skura, Douglas S.	4	14	18
Slagle, Richard B.	0	10	10
Smart, Lawson C.	1	2	3
Snedden, Michael H.	16	11	27
Snyder, Barry J.	0	8	8
Soares, Manuel	12	16	28
Song, Suzette J.	1	7	8
Sotos, Peter N.	1	18	19
Spellman, William H.	1	0	1
Spinuzza, Philip J.	2	14	16
Stabile, Mark L.	2	7	9
Steinfield, Paul H.	9	19	28
Stollsteimer, George T.	0	19	19
Stoudt, Calvin D.	5	1	6
Strzelecki, Zigmund F.	4	8	12
Stuart, Wayne C.	1	1	2
Suhey, Paul V.	1	28	29
Sullivan, Anne C.	0	1	1
Sullivan, Craig A.	6	. 12	18
Sunday, James M	2	2	4
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Surgeon	Hip Cases	Knee Cases	Total Cases
Swanson, Ernest W.	5	15	20
Tase, Douglas S.	1	15	16
Terhaar, Peter J.	3	11	14
Thompson, Linda G.	6	19	25
Tissenbaum, Allan	3	20	23
Tonnies, David A.	8	21	29
Trabulsi, L. Richard	1	3	4
Trager, Stuart L.	1	4	5
Tran, Vinh Binh	4	13	17
Trevlyn, Dean W.	3	18	21
Trubia, Joseph R.	1	4	5
Tucker, Jon B.	1	22	23
Tuckman, Alan S.	0	1	1
Uberti, Edward J.	5	12	17
Vanett, Bruce B.	0	1	1
Vasilakis, Chris	2	5	7
Vermeire, David A.	0	3	3
Vresilovic Jr., Edward J.	3	2	5
Wang Jr., Peter	1	4	5
Ward, Michael J.	1	1	2
Watson, Anthony D.	0	4	4
Welker, David M.	0	1	1
Whitaker, Joseph M.	12	16	28
Whittaker, Richard P.	6	2	8
Winslow, Michael A.	0	1	1
Witkin, Evelyn D.	1	3	4
Wolf Jr., John H.	16	13	29
Wolfe, Raymond M.	7	12	19
Wong, Roger Y.	6	10	16
Woods, Lon D.	5	4	9
Woods, Robert M.	9	8	17
Wukich, Dane K.	4	5	9
Yanicko Jr., Daniel R.	0	1	1
Yardley, Trevor W.	7	12	19
Yarus, Lance O.	0	4	4
York, John H.	8	17	25
Yucha, Thomas J.	3	9	12
Zamarin, Richard I.	5	15	20
Zeliger, Keith L.	8	19	27
Ziegler, Richard W.	4	11	15
Zimet, Daniel L.	9	14	23
Zimmerman, Marc S.	1	4	5
Ziran, Bruce H.	2	4	6



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