

Individual surgeon mortality rates: can outliers be detected? A national utility analysis.

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Harrison EM, Drake TM, O'Neill S, et al. Individual surgeon mortality rates: can outliers be detected? A national utility analysis. *BMJ Open*. 2016;6(10):e012471. doi:10.1136/bmjopen-2016-012471.

<https://psnet.ahrq.gov/issue/individual-surgeon-mortality-rates-can-outliers-be-detected-national-utility-analysis>

[Transparency](#) is touted as central to improving patient safety, but public reporting of data on individual surgeon performance—specifically mortality rates—remains [controversial](#). In 2013, the National Health Service began to publish mortality rates for individual surgeons. This analysis sought to determine whether [variation](#) in individual surgeon performance could be detected using this data. Investigators looked at individual surgeons' mortality rates along with volume data across 6 procedures and inpatient 30-day or 90-day mortality. They determined that surgeons with mortality rates higher than what might be expected would be difficult to identify based on such data and suggest that other outcome measures may provide a more meaningful indicator of surgical performance. A past [WebM&M commentary](#) discussed variation in outcomes with regard to emergency surgery.