

From: Jean Fallick [<mailto:jnfflick@earthlink.net>]  
Sent: Friday, July 10, 2015 8:25 PM  
To: Gelvin, Matthew  
Subject: Cert Surgical First Assistant Testimony

Matthew,

I would like to offer my opinion on the issue of surgical assistant licensure. By way of introduction, I am a General Surgeon practicing in Lincoln. I have been active in the medical staff affairs, and have provided written testimony for the state board of Medicine. I have practiced for nearly 16 years and have been blessed to work with an exceptional certified surgical technician whom my partner hired just prior to my arrival. We perform a full spectrum of operations, including a variety of procedures that all other surgeons in this state either refer to UNMC or to other tertiary centers out of state. We also provide surgical care to numerous smaller communities in SE Nebraska.

My point being that we handle a more complex mix of cases than most community based practices. Given our out of town commitments, my partner and I are often unable to assist one another. Our CST performs admirably in the role of a first assistant, in fact I would equate her skills to that of a fourth year surgical resident (General Surgery residency is five years in length). She has over 25 years of operating room experience. As you might imagine, after the controversy regarding CST licensure developed, her contribution to the procedures became severely handicapped. She now utilizes only a fraction of her skills, many of which I groomed during the sixteen years of supervising her, side by side. In an era where physician autonomy is under continuous assault, the handcuffing of my 'apprentice' has negatively impacted our surgical care.

Regulatory overreach forces physicians to change their numerous passwords at frustratingly frequent intervals. I am hard pressed to think of a regulation in recent years which has made it easier to provide hands on care to our patients. I clearly would support a rapid resolution of this licensure concern in whichever manner that allows the prompt return of our personnel to the full extent of their skills. The number of decisions made in a typical day on behalf of my patients would number in the several hundred. Supervising and directing my surgical assistant is an extension of my daily work and I resent the bureaucratic intrusion. I apologize that I have not had the opportunity to testify at one of the hearings and admit I do not know the current design of the legislation. I simply want my 'team' reunited, at full strength, and doing what we do best for our patients. That is their expectation of us. Thank you for your attention.

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