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5 ways to manage patient outcomes during a bone graft	happy, recovered, active patient	Are you one of the doctors who has experienced a 1-in-4 failure rate on bone grafts? Or is looking for a way to reduce post-surgery complications, like infection or disease transmission? There's a better, easier method for increasing bone graft success rates and managing patient outcomes.
Patient care today requires more than just making sure the operation goes well > Improve patient outcomes (reduce risk of infection/immuno-reactions/disease transmission, risk of rejection/improve integration, minimize chronic pain) > Control Cost/cost effective (reduce cost of materials, OR time, readmission) > Quality/Value - Manage Time (procedure time, readmission)	patient smiling and recovering	In modern medicine, patient care doesn't simply end upon the completion of a successful surgery. Patient care extends to every step of the pre- and post-surgery process, including mitigating the risk of post-surgery infection, decreasing the chances of readmittance and even limiting the cost of the materials used in surgery to reduce a patient's bill.
There are many options when conducting a bone graft procedure, yet there can be a variety of complicating factors	dr/patient back/spine.	With a variety of methods available to doctors when conducting bone graft surgeries, integration decisions can often come down to personal preference. However, the choice of bone grafting method has a major impact in managing surgical complications.
most common complications include: rejection, infection, material cost, morbidity/patient pain		Rejection. Infection. Readmission. Material cost. Morbidity or pain. Successfully navigating these complications is the difference between a quality surgery and a patient's quality of life.
Improve integration - auto		It all begins with improving integration methods. Studies show that autograft implants can be up to 20% more successful than allografts.
reduce chance of infection - auto - size.		Furthermore, autografts assist in meaningfully limiting risk of infection by limiting surgical sites.
Avoid risk of immunoreactions + disease transmission - auto		And by reintroducing the patient's host tissue, you not only reduce chance of infection but also avoid the risk of immunoreactions and rejections.
Minimize possibility of readmission - see above		So if doctor's can improve integration, if they can reduce the risk of infection and disease transmission, then they minimize the possibility of readmission as well. But there is a final benefit to autograft surgeries that studies don't show
avoid costly materials - auto		And that is autograft surgeries have tools designed to efficiently extract the patient's tissue without needing to rely on costly materials. We can lessen the use of costly materials with minimally invasive harvesting tools
Reducing, mitigating or eliminating (DSM) - Minimize chronic pain - minimal pain (if any) at harvest site - corex		Used in over 8,000 autograft surgeries to decrease blood loss and reduce, mitigate—and even eliminate—pain, the COREX Minimally Invasive

	Bone Harvester improves bone grafting procedures at the harvest site.
Reduce procedure/OR/hospital time - just a few minutes to harvest material, if integration is improved/get out of hospital sooner	In just a few simple steps, you can capture cancellous bone in minutes. Which means less time in the operating room for you and less time in the hospital for your patients.
Recap on Autorecep benefits of autograft	With autograft methods, we can improve outcomes by improving integration success while reducing infection, readmission, disease transmission and even the overall cost of materials.
Logo screen - What should we ask them to do?	If you share our passion for improving bone grafting procedures and patient care, come take a closer look at the COREX Minimally Invasive Bone Harvester design, and see how you can make the difference in your patients' lives.