

## What is the average OR utilization (and cases per OR per day) in the United States?

There are many ORs in the US with fewer than 8 hours of cases per OR per day. Eleven community anesthesiology groups in the U.S. had an average of 6.0 hours of anesthesia time per OR per day ([click here](#)). Eight community hospitals in the U.S. had an average of 5.5 hours of OR time per OR per day in their ORs used for knee or hip replacement surgery ([click here](#)). Most ( $\geq 59\%$ ) U.S. facilities complete the majority of their weekly anesthesia workload in the mornings of regular workdays ([click here](#)). US hospitals nationwide average 2.1 cases per OR per day ([click here](#)). In Iowa, averaging among hospitals in Iowa, 77% of the surgeons' lists of cases include 1 or 2 cases and 54% include only 1 case ([click here](#)). At a series of academic hospitals, many ORs had less than 8 hours of cases per OR per day ([click here](#) and [click here](#)). See Figure 1 and Table 1 in Sulecki et al. 2012 for the distribution of the hours of cases and turnovers among multiple US hospitals, and the correlation with individual surgeons' case scheduling ([click here](#)). A good endpoint to monitor is this overall hours of elective cases and turnovers per 8 hour workday and per anesthetizing location. [Click here](#) to go to our sample report then Find 'Long-Term Workload'. [Click here](#), [click here](#), and [click here](#) for the corresponding papers.

However, these data are not useful for any individual facility. There are three reasons. First, "surgical service" refers to a group of surgeons who share allocated OR time. An individual surgeon, a group, a specialty, or a department can represent a surgical service. There is usually heterogeneity among services in their adjusted and raw utilization. Thus, the overall average utilization at a facility is of unclear importance. Second, for services that have been allocated one OR on some days of the week, the utilization cannot be measured accurately unless the value is too low or high as to be of no practical value ([click here](#) for the abstract of the mathematical paper [[click here](#) to download the full article] and [click here](#) for the paper showing generalizability statewide). Third, for services that have been allocated two or more ORs on some days of the week, one such OR can have under-utilized OR time (i.e., adjusted utilization  $< 100\%$ ) while another such OR has over-utilized OR time. Then, the average utilization has no relationship to costs, the inefficiency of use of OR time, or OR staffing.

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