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WHAT DOES CLINICAL MANAGEMENT CONTRIBUTE TO THE DAILY LIFE OF THORACIC SURGERY?

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Clinical Management is a discipline that has undergone various modifications in its configuration throughout its existence due to the need to adapt to the sociological situation and clinical practice in each field of action within the health care in different countries or regions, which are also affected by their organizaTional particularities.

This is not different for the field of the Thoracic Surgery.

How it can help us arises from its precepts and different areas of action. Since these areas are very wide, we can focus on those that can most affect us as a surgical specialty.

It would be advisable for all Thoracic Surgery Departments to have a strategic planning in which their mission, vision and values are known, as well as the path they wish to follow through strategic deployment with a view to geRng Specific, Measurable, ASainable, Realistic and Timelimited (SMART) results.

To this end, we can rely on the quality of care, understood as the best way of dealing with the different diseases we have to face through the use of clinical practice guidelines, protocols, clinical pathways, the establishment of indicators and their monitoring for continuous improvement, as well as the certification of our good practices.

The control of results is another of the aspects that must make us work for our patients. This involves not only monitoring the results of our procedures with indicators of morbidity, mortality at 30 or 90 days, but also those that reflect the impact on the quality of life of our patients, both in terms of objective and perceived results (PROMs - PREMs). The creation of rigorous databases will allow us not only to establish this control but also the possibility of comparison with other entities (Benchmarking) in order to continue to improve and redo those facets that require a modification in our actions (Kaizen).

Clinical Management must be understood as a tool that will help us to ensure that our aRtudes towards our patients are the most appropriate, based on the best scientific evidence and on the specific patient in front of us. That is why it is not difficult to understand the current paradigm shi^ in which the participation of patients, once they have received clear and concise information in the decision of all diagnostic and therapeutic aspects in which they are involved, is essential and to which Thoracic Surgery must not be insensitive.

Nowadays, the participation of artificial intelligence, as well as business intelligence tools, is more than recommendable for all these purposes.

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