

Success Story

Good Samaritan Hospital

As a Senior Biomedical Engineer at Good Samaritan Hospital in Dayton, Ohio, Richard Lowery has seen just about everything that can go wrong with clinical equipment. He's also no stranger to the hoops he's often got to jump through to get it fixed.

Good Samaritan Hospital is a 400-bed facility that Lowery describes as “medium-sized, but very lean when it comes to equipment.” With about 12,000 devices maintained among Good Samaritan's clinics and remote sites, that's a more-than-respectable workload to have to deal with.

As Lowery puts it, “There just aren't a whole lot of spare devices lying around,” which means that when one goes out of service, it backs up staff's ability to process patients.

Given Good Samaritan's affiliation with the Catholic Health Hospitals network and its institutional directive emphasizing patient care, Lowery and his colleagues must limit equipment downtime as much as possible. With that directive in mind, Lowery's discretionary powers naturally incline him towards repairing or refurbishing his existing equipment rather than purchasing new gear.

“Let's say I have a piece of equipment that's broken,” Lowery says. “If my hospital wants to go buy a brand new one, we have to go through administration to get approval before we can purchase it. If I know a company can provide me with a refurbished one and take a trade-in on my old one, I don't need an approval process. I just cut a purchase order and it's done.”

HUNTING FOR PARTS

However, for Lowery, it's often not as simple as merely reaching out to the original equipment manufacturer to obtain replacement parts. For starters, he says, there's a long wait before you can even speak to the person responsible for handling your specific request.

“The way these companies are set up,” Lowery says, “you don't know what division is responsible for what device. These companies sell off divisions all the time. The labs change hands and you never speak to the same people.”

Once he can track down the person with whom he needs to speak, the next hurdle Lowery typically encounters from OEMs involves the work required to locate the part itself—and then the recovery from the resultant sticker shock.



Good Samaritan Hospital of Dayton, Ohio, relies on Ozark Biomedical for troubleshooting and repairs.

“A lot of times the parts are back-ordered,” he says. “They almost never have them in stock, and you're always paying full price for new parts. There's never any discount. If you want a motor from a manufacturer, you're paying three grand for it.”

Perhaps what surprises Lowery most of all is how institutionalized the system of OEM priority vendors has become—and, more to his disappointment, how limited their success rate is by his measure: sixteen years in the field of clinical engineering.

“I've worked as a third-party person working for several different contracted clinical equipment repair companies,” he says. “Every one of those companies has a priority vendor, and many of them are just not very good.”

Lowery goes on to describe instances in which one company sent him a 220-volt centrifuge motor when he needed a 120-volt motor, or how another sent him a circuit board designed to work

with European model centrifuges when he needed one for American gear.

“They don’t have somebody at some of these companies that can provide technical support,” he says. “You don’t call them for that. They only sell you the part. You may order the wrong part because you don’t know—and neither do they.”

Worse, and most vexing for him, however, were their return policies. After sending him the wrong parts to complete his repairs, the two companies he mentions both charged him a 10 percent restocking fee, even though the error was theirs in recommending the wrong part, Lowery says.

“There’s not a whole lot you can do,” Lowery says. “I still have to have the part. So I can pay \$2,000 to buy the motor from the manufacturer, or \$660 for the wrong motor plus the restocking fee.”

Going through the prescribed channels for replacement parts delayed his repairs anywhere from two to six weeks. Recall that Lowery’s main priority is equipment uptime for the sake of patient throughput, and it’s no wonder he quickly sought out a third-party vendor.

FINDING A SOLUTION

Enter Ozark Biomedical of Beebe, Ark. Lowery first encountered the company in a previous job he held in Arkansas. He recalls being in a jam and “throwing about eight centrifuges in the back of my truck,” and taking them to Ozark for repair.

“They fixed ‘em all, I took them back to the lab, and was hailed as a genius,” he says.

Lowery was struck by their friendly, no-nonsense approach to the business—as well as their ability to rebuild his centrifuges at about 20 percent of the cost of OEM replacement parts.

“The quality of the parts that I’m ordering is just as good as what I could order brand-new from the manufacturer,” he says, “so I know I’m not going to have to go back and repair something that’s already been done.”

With a third-party supplier like Ozark, Lowery knew who he’d reach when he picked up the phone. No more wasted hours waiting to be routed to the appropriate service division for the equipment he needed to have services.

“We have about 10 different brands of centrifuges at our hospital, and regardless of which it is I just call Ozark. In the past 13 years I’ve been working with them, there’s never been anything I’ve had that they can’t work with. If I get something from them that doesn’t work the way it should, I can send it back and they’ll send me a new one.

“It hasn’t happened yet, but I know they would do it,” he says. Lowery also values the fact that, unlike OEM suppliers, companies like Ozark Biomedical are staffed by professionals who have the ability to troubleshoot repair calls over the phone. This approach limits the likelihood that Lowery will receive the wrong part.

CUSTOMER SERVICE IS KEY

“Whenever I call them, they might not have the answer right away, but they have somebody in their company who knows how to fix it, and they can get back to me, he says.

Thanks to the reliability of a good third-party equipment provider, Lowery has been able to cut down service calls by about 75 percent on some of his equipment. Each biomed at Good Samaritan Hospital handles about 2,000 pieces of equipment. With less service calls, Lowery and other Good Samaritan biomedics can devote saved time to other much-needed projects. Given his free hand to contract with parts suppliers and equipment vendors that meet his needs, Lowery is dumbfounded as to why more vendors fail to cater to the needs of working clinical engineers.

“Not only do we have the ability to make these type of calls within our own company, but the Catholic Health system has about 84 hospitals throughout the entire United States,” Lowery says. “If a company has a bad reputation, they’re not our primary vendor anymore. That can affect their bottom line.”

“All our biomedics have a lot of say in who we go through,” he says. “One would think these companies would be a little more concerned and a little more helpful, but they’ve got their own agendas.”

Conversely, a good third-party parts and equipment provider like Ozark Biomedical can earn a significant amount of business just by being reliable and responsive. Lowery says that wherever he’s gone, he’s diverted as many of his support contracts as he can to Ozark Biomedical because he’s never had an issue with their service.

“I know that the last company I worked with is still using them in the facility that I worked in,” Lowery says. “They know they only have to call one person to get technical support and only one group of people to order the part. The time that saves the biomedical technician is tremendous.”

“I even had experiences where other companies that I’ve called for help have referred me back to Ozark Biomedical.” 