

CUSTOMER SUCCESS STORY

UT Medical Center Achieves 8% Surgical Volume Growth Without Adding ORs

Top 3 Key Results:

8%

increase in case volume in two years

9,500+

hours of open time requests approved through transparent access workflows

3x

return on investment in one year



Summary

The University of Tennessee Medical Center is a 750-bed Level I trauma center serving 200,000+ patients annually in Knoxville, Tennessee. As the region's academic medical center, UT Medical Center operates 36 main operating rooms, a hospital-based surgery center, endoscopy center, and three joint venture ASCs performing more than 28,000 procedures each year. UT Medical Center partnered with LeanTaaS to transform OR access and implement data-driven capacity management.

Problem

UT Medical Center faced significant challenges in maximizing existing OR capacity. Surgeon offices relied on fragmented, manual workflows — spreadsheets, phone calls, and hallway conversations — to find and request available OR time. Without clear visibility into open capacity, available time often went unused or was allocated inefficiently. The organization's heavily blocked schedules and dedicated room allocations created additional constraints that made it difficult to match OR availability with changing surgical demand.

Block utilization decisions were historically driven by anecdotes and political influence rather than objective data. The organization lacked credible, transparent metrics that stakeholders trusted, making productive conversations about capacity allocation nearly impossible. With significant surgical growth and continued high demand from recruiting new surgeons, UT Medical Center needed to optimize existing resources before considering physical expansion.

Solution

UT Medical Center implemented iQueue for Operating Rooms to modernize scheduling workflows and enable data-driven capacity decisions. The platform provided surgeon offices with real-time visibility into available OR time through a streamlined request and approval system, replacing fragmented manual processes.

The solution's transparent utilization reporting and visualization tools transformed block time conversations. The visualizer's pictorial representation of block usage created undeniable visual evidence that shifted discussions from subjective arguments to objective problem-solving.

UT Medical Center required all scheduling requests to flow through iQueue, ensuring complete adoption and full data capture. Change management tools including release contests, transparent reporting, and block policy playbooks normalized better release behaviors and created cultural momentum. The LeanTaaS team provided ongoing collaborative support, presenting to OR committees, customizing reports, and helping the organization develop new block management policies that enabled better time distribution across service lines and supported broader perioperative optimization initiatives.

Results

8%

increase in case volume in two years

9,500+

hours of open time requests approved through transparent access workflows

3x

return on investment in one year

5%

increase in staffed room utilization despite anesthesia staffing constraints

1,100+

block releases processed through iQueue

“Real-time access transparency and data-driven conversations have been transformational. Having data that people believe — that you can walk them through and show in real-time — creates trust that's critical to making shared decisions. Visibility truly unlocks growth.”

— Melanie B. Burgess,
Vice President Perioperative Services and Executive
Director of the Center for Perioperative Medicine,
The University of Tennessee Medical Center

