



Media Information Kit



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 - Hugo D. Ribot, Jr., M.D., F.A.C.O.G
 - D. Malcolm Barfield, D.O., F.A.C.O.G.



For Immediate Release

NEW GEORGIA ADVANCED SURGERY CENTER PROVIDES WOMEN MANY UNIQUE BENEFITS

"Center of Excellence" Facility Is Among Few in Nation

Cartersville, Ga.; June 2 – The Georgia Advanced Surgery Center for Women (GASC) – Georgia's first accredited surgical center for performing all major and minor gynecological surgeries in a true outpatient setting – has officially opened. The state-of-the-art facility specializes in laparoscopic and other highly advanced, minimally invasive surgical techniques that spare women costly hospitalization, unsightly incisions and lengthy recoveries for hysterectomies, incontinence procedures and numerous other surgeries. It also is among only a few facilities in the country qualifying for "Center of Excellence" designation by the certification division of the American Association of Gynecological Laparoscopists (AAGL), the surgical specialty's premier standards-setting organization.

"This facility provides women the highest level of gynecological treatment available today – plus a proven, convenient and cost-effective alternative to hospital-based care," said Hugo Ribot Jr., M.D., founder and medical director of the GASC. "Even our patients undergoing the most comprehensive procedures safely return home the same day as surgery," he added, "with far faster, less painful recoveries than traditional surgery provides. Women who have total hysterectomies here, for example, can resume most activities within a week – versus six to eight weeks with open abdominal surgery."

Ribot said that the outstanding patient safety, results and satisfaction with the GASC's special outpatient protocol have been proven in a major study presented in 2008 to the AAGL and published that year in *The Journal of Minimally Invasive Gynecology* – as well as by thousands of such surgeries performed over the past two decades by Ribot's practice, Cartersville Ob/Gyn Associates.

The GASC is located within the same medical building as Cartersville Ob/Gyn Associates, and co-owned by practice partner Malcolm Barfield, D.O. In addition to the latest surgical equipment, the facility features leading-edge video and webcast technology for training surgeons.

"We uniquely provide the most modern surgical care within the most cost-effective surgical environment," said Barfield, "which benefits women, employers and insurance providers alike."

Ribot and Barfield are Emory-trained, board certified Ob/Gyns specializing in advanced laparoscopy. The GASC is among many innovations they have introduced in Georgia.

For more information: www.GA-AdvancedSurgeryCenter.com.

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Backgrounder

The story of the Georgia Advanced Surgery Center begins in 1990, when Hugo Ribot Jr., M.D., joined Cartersville OB/Gyn Associates after completing his residency at Emory University Affiliated Hospitals in Atlanta.

While at Emory, he and another Ob/Gyn resident learned of the first laparoscopic hysterectomy performed in the U.S., by Harry Reich, M.D., in 1988. Eager to embrace what would become the gold standard of gynecological surgery, they began performing laparoscopic procedures never before done at Emory by faculty or residents. They removed ectopic pregnancies, tubes, and ovaries without laparotomy (making a large incision). To the surprise of their faculty at the time, their patients did extremely well, with a much faster, less painful recovery than those undergoing traditional open surgeries. Keep in mind there were then no video cameras. Surgeons had to literally put their eyes up against the telescope, and no one else in the operating room could see inside the patient's abdomen! There were no special bloodvessel sealing devices, nor instruments to enable suturing through laparoscopic instruments. Despite this primitive instrumentation, the residents persisted. Their success led Ribot to receive the first-ever annual "Best Surgical Resident Award" bestowed by the American Association of Gynecological Laparoscopists (AAGL) at Emory.

Ribot's goal became to continue advancing minimally invasive surgical procedures in private practice. As new surgical instruments were introduced, he studied and tested all, and became expert in assessing which would deliver the utmost patient safety and outcomes in accomplishing these highly technical procedures. He was the first Ob/Gyn in the Cartersville and surrounding northwest Georgia area to provide women non-invasive sterilization, as well as the first to introduce minimally invasive surgical procedures for hysterectomy, bladder control problems, uterine fibroids, endometriosis, and numerous other pelvic and gynecological conditions. At the same time, he also spent a prodigious amount of professional time developing and refining a feasible outpatient surgical protocol for these procedures.

In 2006, Dr. Ribot implemented this outpatient protocol, enabling even the most comprehensive gyne-cological surgeries to be performed as same-day procedures. The outstanding safety, efficacy, feasibility, patient outcomes and acceptance of the protocol were subsequently proven in a major study comprising the largest series of consecutive, outpatient hysterectomies ever documented. This data was presented to the AAGL at its November 2008 annual meeting and published that year in the *Journal of Minimally Invasive Gynecology*.

With his success officially recognized and validated, Dr. Ribot and his professional partner, Dr. Malcolm Barfield, set out to create the first surgical facility in Georgia for providing all major and minor gynecological surgical procedures in a true outpatient setting. This facility, the Georgia Advanced Surgery Center for Women, officially opened in May 2010. It is among only a few facilities in the entire country qualifying as a "Center of Excellence" by the AAGL's certification division for its highly advanced surgical techniques, rigorous safety standards and commitment to outstanding patient outcomes.



Fact Sheet

The Georgia Advanced Surgery Center for Women is Georgia's first accredited surgical center for performing all major and minor gynecological surgeries in a true, proven outpatient setting – and among only a few facilities in the U.S. qualifying for "Center of Excellence" designation by the certification division of the American Association of Gynecological Laparoscopists, the surgical specialty's premier standards-setting organization.

Opening Date May 2010

Location Cartersville, Georgia (45 minutes north of Atlanta)

Facility Description A state-of-the-art, freestanding ambulatory surgical center specializing in

highly advanced, minimally invasive gynecological surgery. In addition to the most modern surgical equipment, the 4,000-square-foot facility features

leading-edge video and webcast technology for training other surgeons.

Unique Benefits No costly hospitalization, no unsightly incisions, cost-effective outpatient

setting, and far faster, less painful recovery than traditional gynecological

surgery.

Mission The Georgia Advanced Surgery Center for Women is dedicated to provid-

ing women with the latest, safest, most effective and least invasive surgical solutions available for the treatment of gynecological and pelvic conditions,

and to ensuring that patients have the best surgical experience and

outcomes possible.

Surgical Services/

Procedures

Laparoscopic and other minimally invasive surgical procedures for treating abnormal uterine bleeding, bladder control problems (incontinence), fibroids, endometriosis, heavy periods, infertility, ovarian cysts, pelvic organ prolapse, and numerous other gynecological and pelvic conditions. Major procedures include: hysterectomy; pelvic organ prolapse surgery; bladder and vaginal slings; endometrial ablation; non-invasive sterilization; and

tubal ligation reversal.

Accreditations/ Certifications

- Joint Commission on Accreditation of Healthcare Organizations (pending)
- Center for Gynecologic Endoscopy (CGE), American Association of Gynecological Laparoscopists (AAGL)
- Medicare (Center for Medicare and Medicaid Services, known as CMS); Georgia Department of Community Health

Surgical Staff

- Hugo D. Ribot, Jr., M.D. Founder/Owner, Medical Director and surgeon
- D. Malcolm Barfield, D.O. Owner and surgeon
- Shelley Caldwell, C.S.T., C.F.A. Certified Surgical First Assistant
- Kristi Plank, R.N., B.S.N. Clinical Manager
- April Hammock, R.N., B.S.N. Pre-op/Post-op Coordinator
- Faith McCollum, S.T. Surgical Technologist



Unique Advantages and Benefits

Laparoscopic and other minimally invasive techniques have revolutionized the way gynecological surgery can be approached, providing women with numerous advantages over traditional surgery – including less trauma to patients, minimal damage to body tissues, virtually no blood loss, fewer complications, no unsightly scars, far less post-operative pain and discomfort, dramatically decreased risk of infection, and much quicker recovery time. The Georgia Advanced Surgery Center uniquely provides women several additional advantages over traditional surgery, as well as other minimally invasive surgical centers and techniques, including:

Safe, Same-day Surgery – We are the only facility in Georgia, and among only a few in the U.S., that performs all major and minor gynecological and pelvic procedures as true outpatient surgeries. Even our hysterectomy patients safely return home the same day of surgery.

No Costly, Inconvenient Hospital Stays – Our unique surgical approach eliminates the need for costly hospitalization, as well as its associated higher costs and risks of infection.

Super-Fast Recovery – Our highly advanced surgical techniques provide women the quickest possible recovery, with minimal downtime from work, family and friends. Our patients who have hysterectomies or incontinence procedures, for example, can drive within 2 days and resume most activities within a week – versus 2-3 days of hospitalization and 6-8 weeks of painful recovery with traditional surgery.

Proven, Successful Approach – The outstanding patient safety, outcomes and satisfaction with our outpatient protocol have been validated and published in the journal of the American Association of Gynecological Laparoscopists (AAGL), the premier standards-setting organization for our surgical specialty.

"Center of Excellence" – Our advanced surgical techniques, combined with our rigorous standards for patient safety and excellent results, qualify our facility among the nation's few with this prestigious designation by the AAGL's certification division.

Expert, Highly Skilled Surgeons – Our Board Certified gynecological surgeons are recognized experts and leaders in minimally invasive surgery, with 25+ years of combined experience in performing thousands of such procedures. They routinely perform more laparoscopic surgery than any other Ob/Gyn practice in northwest Georgia, and have introduced numerous advancements in the specialty that have become the gold standard of treatment for common gynecological and pelvic conditions.

Comfortable, Convenient Setting – Our outpatient facility provides patients a warm, easily accessible alternative to the often cold and overwhelming environment of hospitals. We are conveniently located in the same private medical building as our Ob/Gyn practice, just 45 minutes north of Atlanta.



COMPARISON OF HYSTERECTOMY PROCEDURES TOTAL ABDOMINAL HYSTERECTOMY (TAH) VS.

TOTAL LAPAROSCOPIC HYSTERECTOMY (TLH) AND TOTAL VAGINAL HYSTERECTOMY (TVH)

Hysterectomy Type	TAH	TLH	TVH
Where	Hospital	GASC	GASC
Hospital stay	3-4 days	None	None
Average pain medication use*	Up to 14 days	3-5 days	3-5 days
Return to driving	7-14 days	2-3 days	2-3 days
Return to work* (desk job or similar)	4-6 weeks	1-2 weeks	1-2 weeks
Incision required	6"-8" horizontal, C-section-size scar	2-4 tiny (1/4") incisions with invisible stitches	None
Postoperative restrictions	Vaginal rest x 5 weeks No lifting/exercise x 6-8 weeks	Vaginal rest x 5 weeks No lifting/exercise x 1 week	Vaginal rest x 5 weeks No lifting/exercise x 1 week
Length of Procedure	2-3 hours	1–1½ hours	45 minutes–1 hour
Need for bladder catheter	100% for 1-2 days	10% overnight	15% overnight
Rate of bladder/ureter injury	Up to 5%	Less than 0.5%	Less than 0.5%
Risk of wound infection	5-10%	Less than 1%	Less than 1%
Risk of hospital- acquired infection	Yes	No	No
Ability to remove any size uterus	Yes	Yes	No
Ability to also treat all other gyn/pelvic conditions	No	Yes	No

^{*} A significant number of hysterectomy patients of GASC surgeons report experiencing no post-operative pain or need/use of prescribed pain meds, and returning to work two days following their surgery.



Hugo D. Ribot Jr., M.D., F.A.C.O.G. Biography

Hugo Ribot Jr., M.D, is a Board Certified physician in the specialties of obstetrics and gynecology, and advanced operative laparoscopy. He is the founder and medical director of the Georgia Advanced Surgery Center for Women, the owner and managing partner of Cartersville Ob/Gyn Associates, and a leading pioneer of minimally invasive gynecological surgery since its introduction in the late 1980s.

Dr. Ribot received his medical degree from the University of Miami School of Medicine in 1986. He completed his residency in obstetrics and gynecology at Emory University Affiliated Hospitals in 1990, receiving its first-ever annual "Best Laparoscopic Surgical Resident Award" bestowed by the American Association of Gynecological Laparoscopists. In 1990, he joined Cartersville Ob/Gyn Associates, where he has introduced numerous advancements in minimally invasive surgery that have become the gold standard of treatment for common gynecological and pelvic conditions.

Dr. Ribot was the first Ob/Gyn in the Cartersville/northwest Georgia area to provide women non-invasive sterilization; to perform laparoscopic procedures for hysterectomy, urinary incontinence, uterine fibroids, endometriosis, uterine prolapse and many other gynecological/pelvic conditions; and, in 2006, to introduce a true outpatient surgical protocol for these procedures. The culmination of his career is his founding of the Georgia Advanced Surgery Center for Women, which opened in May 2010.

Dr. Ribot is a member of the American College of Obstetricians and Gynecologists, American Society of Reproductive Medicine, American Association of Gynecologic Laparoscopists, Medical Association of Georgia, Society of Elite Laparoscopic Surgeons, One Kilo Club, and the Bartow and Cobb County Medical Associations. He has served as the Ob/Gyn department chairman of Cartersville Medical Center, as well as on the hospital's medical executive, peer review, credentials, and perinatal risk management committees. Since 2004, he also has served on the Board of Directors of the Tranquility House Battered Women's Shelter.

Born in Argentina and a U.S. citizen since 1983, Dr. Ribot is fluent in Spanish. He is a 1981 graduate of Dartmouth College. He has lived in Cartersville since 1990, and is married with three children.



D. Malcolm Barfield, D.O., F.A.C.O.G. Biography

Dr. Malcolm Barfield is a Board Certified physician in the specialties of obstetrics and gynecology, and also performs advanced operative laparoscopy. He is an owner and surgeon of the Georgia Advanced Surgery Center for Women, as well as a partner and practicing physician of Cartersville Ob/Gyn Associates.

Dr. Barfield completed his residency in obstetrics and gynecology at Emory University Affiliated Hospitals in 2004. Since then, he has devoted his private surgical practice to laparoscopic and other highly advanced, minimally invasive surgical techniques, introducing to the northwest Georgia area many innovations in the specialty. He was the first doctor in Rome, Georgia to perform laparoscopic hysterectomy.

Dr. Barfield is a 2000 graduate of NOVA Southeastern University School of Osteopathic Medicine. He completed his internship at the Children's and Women's Hospital of the University of South Alabama. He holds a Bachelor of Science degree in microbiology from the University of Georgia. He also holds a paramedic certificate from Athens Area Technical Institute, and worked as a paramedic/firefighter for eight years before entering medical school.

He is a member of the American College of Obstetricians and Gynecologists, the American Association of Gynecologic Laparoscopists and the Medical Association of Georgia. He has served on the credentials committee of the Cartersville Medical Center, and is currently its chairman.

A native Georgian, Dr. Barfield grew up in Thomaston. He lives in Cartersville with his wife, Dr. Katherine Barfield, and their two sons.



Overview of Surgical Services/Procedures

Our expert, Board Certified surgeons use laparoscopic and other highly advanced, minimally invasive surgical techniques to diagnose and treat numerous gynecological, pelvic and abdominal conditions, including abnormal uterine bleeding, bladder control problems (incontinence), endometriosis, fibroids, heavy periods, infertility, ovarian cysts, painful intercourse, pelvic adhesions, pelvic organ prolapse and polyps. We also use laparoscopy for tubal sterilization and tubal reversal. Our special surgical techniques enable all major and minor procedures for treating these conditions to be safely performed as true, same-day outpatient surgeries – with far faster, less painful recovery than traditional surgery, as well as proven advantages over robotics surgery. These procedures include:

- Total laparoscopic hysterectomy (TLH) removal of the whole uterus without a large incision.
- Laparoscopic supracervical hysterectomy (LSH) removal of the uterus, with preservation of the cervix and without a large incision.
- Total vaginal hysterectomy (TVH) removal of the uterus with no incisions.
- *Endometrial ablation* destruction of the endometrial lining of the uterus for the treatment of abnormal uterine bleeding or heavy periods as an alternative to hysterectomy.
- *Myomectomy* removal of fibroid tumors, using laparoscopy or hysteroscopy, as an alternative to hysterectomy for the treatment of abnormal or heavy bleeding caused by fibroids.
- *Polypectomy* removal of polyps from the uterine wall, using hysteroscopy, as an alternative to hysterectomy for the treatment of abnormal or heavy bleeding caused by polyps.
- Minimally invasive vaginal sling (TVT) for treatment of stress urinary incontinence.
- *Minimally invasive surgery for pelvic organ prolapse* (dropping or vaginal bulging of female organs due to supporting tissue weakness or injury), including vaginoplasty (pelvic floor reconstruction).
- Laparoscopic fertility-promoting surgery, including tubal ligation reversal, salpingoneostomy (treatment of blocked tubes), and laparoscopic excision of endometriosis (one of the most common causes of female infertility).
- Non-invasive sterilization (Essure procedure) and laparoscopic tubal ligation.
- Laparoscopic ovarian surgery for removing ovarian cysts and treating ovulation dysfunction.
- Laparoscopic uterine suspension for treatment of painful intercourse caused by retroversion of the uterus (commonly called a "tipped" or "tilted backwards" uterus).
- *Interstim*® non-invasive treatment of overactive bladder (urge urinary incontinence).
- *Dilation & Curettage (D&C)* for removal of uterine polyps or fibroids in treating abnormal or heavy bleeding, or for sampling uterine tissue for diagnostic or therapeutic purposes.

What is Laparoscopy?

Laparoscopic surgery is performed using an instrument called a laparoscope, which is a thin, lighted telescope that is inserted through a tiny half-inch incision made in the navel. The laparoscope enables the surgeon to see and operate inside the abdomen without having to make a large incision. The advantages of this approach include less trauma to patients, minimal damage to body tissues, diminished blood loss, fewer complications, no unsightly scars, far less post-operative pain, and much quicker recovery time.

What is Hysteroscopy?

Hysteroscopy enables a physician to look through the vagina and neck of the uterus (cervix) to inspect the cavity of the uterus with a telescope-like instrument called a hysteroscope. Hysteroscopy is used as both a diagnostic tool and a treatment tool (for removing polyps, cutting adhesions and performing other procedures).