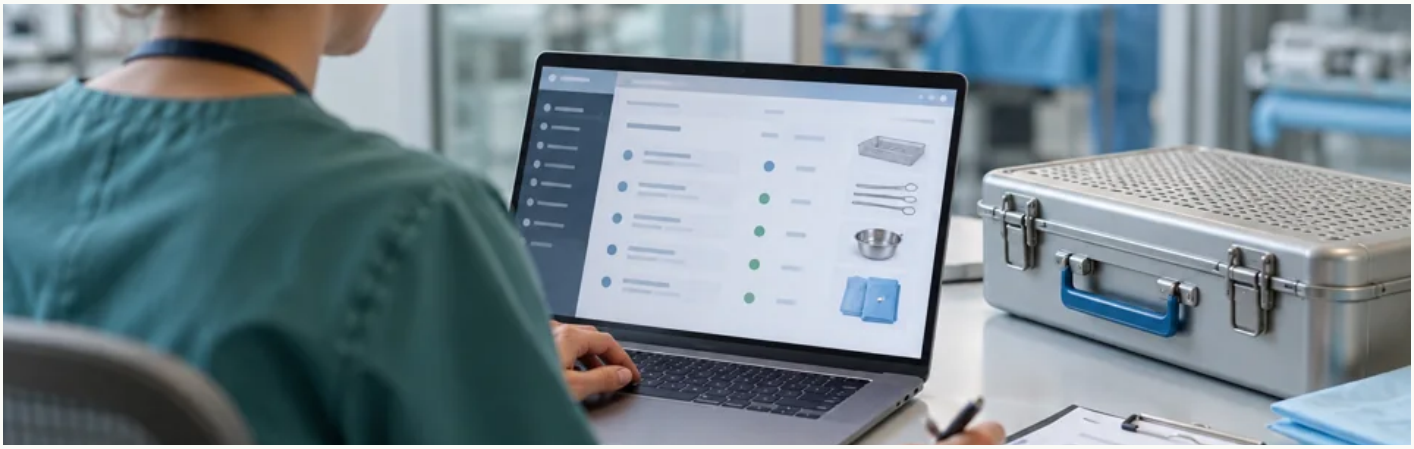
PREFERENCE CARD MANAGEMENT

Plan the requirement. Pick the actual assembly.

Keep surgeon and procedure requirements connected to practical case preparation.



Illustrative imagery

The operational challenge

A preference card describes what a future case should need. It is different from the list of assemblies actually picked today. Treating those two records as interchangeable obscures both preparation requirements and case traceability.

The SurgiDat approach

SurgiDat manages preference cards using surgeon and procedure information, parent kits and quantities. Live picking scans identified assembly UIDs to the actual case, or uses a requirement to support picking to a cart.

The value to evaluate

Clear requirements and identifiable picks support case preparation, stock coordination and investigation of shortages. A disciplined card-review process can help identify unnecessary picks and avoidable handling for local evaluation.

PREFERENCE CARD MANAGEMENT

A practical workflow

01	**Define the requirement** Maintain card identity, surgeon and procedure details, then add parent kits and required quantities.
02	**Map the kits** Use tray and kit matching to connect catalog items with facility kits and apply the mapping to preference cards.
03	**Pick the real assemblies** Choose the case or cart workflow and scan the assemblies actually selected for it.
04	**Review and refine** Where appropriate, save a scanned case as a future requirement card and review the requirement through the facility's agreed process.

An illustrative scenario

A surgeon's procedure requires two kits. The preference card holds that requirement. Staff then pick specific available assemblies and associate them with the scheduled case, preserving the distinction between intended needs and the actual pick.

Measures for a facility pilot

- Time to prepare and pick a representative case
- Cases requiring a late kit substitution or additional pick
- Requirement changes identified during scheduled card review

A focused starting point

Start with a limited surgeon and procedure group. Validate kit mapping and quantities, then walk from the saved requirement through actual case picking and return counts. Agree how card changes will be reviewed and maintained.

Scope and interpretation

A printed preference card is a requirement list, not proof of the assemblies on today's case. Picking and patient allocation do not prove that every picked instrument was clinically used.

Start with your workflow

Bring your operational question to a SurgiDat walkthrough. No annual subscription commitment: start and leave when you want.

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