

Beyond Clean Vendor Management Expert:

TO CONSIGN OR NOT TO CONSIGN?

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If you think the rep uses your facility as a storage facility, you're probably right. And, if they are the only one who knows what is there, why wouldn't they?

Consignment inventory are like taxes: everyone has them and it's much easier to have someone else handle and hope you don't get audited down the road. However, in the tax scenario, a CPA is [hopefully] uniquely trained and focused on decreasing your tax liability. When leaving consignment inventory to your rep, their focus is NOT optimizing your inventory.

When space is at a premium for many facilities, don't rely on your rep to make space. They and their manufacturer don't have it down to any more of a science than you do. As a rep, I found trays at hospitals that my office had written off years ago because the previous rep had forgotten where they left them.

How you manage your consignment is indicative of how reliant you are on your reps. The individual you have in place now might be great, but what happens when they are replaced by someone less reliable/honest? When a consigned tray is missing, how does that discussion go? You can argue that is their job as a rep to manage those trays, but it's often the facility's wallet covering the loss.

At the very least, facilities should take control of the process for consignment. After the surgeon has confirmed their necessity, you can use a trial period as a "parked loaner" where you can evaluate how often they are being used. Once verified, utilize whatever inventory management system you have (at the very least a spreadsheet) to record and save consignment paperwork and IFU information. Lastly, make sure to include a process to monitor utilization so you can purge anything not turning (at your facility anyway).

Have more vendor management questions? Contact Jeff at: jwertz@surgio.com

