Introduction

Day case paediatric surgery has been shown to minimise the psychological trauma of separation\(^1\), whilst also reducing cost and improving utilisation of staff and hospital facilities\(^2\). Unplanned admission for overnight stay has been used as a crude measure of quality of care received within the Day Surgery Unit\(^3\), and therefore it is important to audit this in order to monitor current practice and implement improvements.

Methods

Data was collected retrospectively using a combination of patient case notes and theatre and nursing notes on the MEDITECH computer system. A total of 92 patients in the period 01/04/11-01/11/11 were recovered from 4834 day case procedures over the same time frame. 10 of these patients were subsequently excluded. Of the remaining 82 patients 72 patients had an overnight stay.

Results

Discussion

By far the most common reason for admission was for surgical observation. 15 of the 44 (34%) were admitted for routine observation, some of which had documented plans for admission in the pre-op clinic visits. None of the 15 patients admitted for medical observation were ASA I, with 73% being ASA III. These should therefore have been planned admissions. Of the 4 patients admitted for not passing urine 3 had circumcisions and none these patients required an overnight stay with an average time to passing urine of 4 hours.

Conclusions

- Circumcision day case patients should be discharged with advice sheet of signs of retention and importance of returning if fail to pass urine overnight
- Reinforce importance to surgeons of only listing surgical cases suitable for day case surgery as day case procedures.
- Reinforcement to surgeons to rethink listing ASA 3 patients for day case procedures as these patients are likely to need overnight observation- at least 11 out of the 82 cases should have been anticipated for this reason alone. They should be encouraged to refer to the pre-operative assessment clinic and/or anaesthetic staff and this may come as a prompt on the computer booking system.

References