AB236. Rates of ASA 1 and 2 patients attending preoperative assessment clinic

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Background: Pre-operative anaesthetic assessment decreases cancellations on the day of surgery, improves patient's experiences and may reduce complication rates and mortality Whilst the pre-operative assessment service should be predominantly an anaesthetic consultant-led service, skilled nurse practitioners are safe and cost-effective in preparing patients for anaesthesia.

Methods: A prospective audit over a four week period between September and October 2019. Data was gathered on all patients assigned American Society for Anesthesiologists (ASA) physical status classification 1 and 2 by the examining anaesthesiologist. This was then compared to the database of all patients attending within the audit period.

Results: Data was obtained for 22 ASA 1 and 2 patients attending out of a total 84 patients within the defined period. Only 4 (18.1%) had anaesthetic concerns to be addressed, 3 had neck mobility issues and 1 had multiple



drug allergies. Fourteen patients required additional investigations, all were routine blood tests except one that required an echocardiogram. Fifty percent of the patients were deemed to be inappropriate referrals to the pre-assessment clinic, this included 100% of the ASA 1 patients. Fifteen (17.8% of the total patients attending) were considered appropriate for nurse-led telephone assessment alone. Fifty percent of the electronic referrals made had incorrect patients details. AAGBI. (January 2010). Pre-operative Assessment and Patient Preparation The Role of the Anaesthetist. Retrieved from doi:http:// dx.doi.org/10.21466/g.PAAPP-T.2010. HSE. (November 2018). Model of Care for Pre-Admission Units [Press release]. Retrieved from https://www.hse.ie/eng/services/ publications/clinical-strategy-and-programmes/anaesthesiamodel-of-care-for-preadmission-units.pdf

Conclusions: A significant proportion of patients presenting to the anaesthesiologist-led preoperative assessment could be assessed via nurse-led telephone assessment. This would make considerable savings in resources. Surgical teams would also benefit from education on the purpose of the preoperative assessment clinic and the importance of accurate referral information.

Keywords: Pre-operative assessment; resources; appropriate referral

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