

## AB108. SOH21AS192. Maximising day case surgery in the coronavirus disease (COVID) era: a case in point

Michael Joseph Harold MacLean, Claire Donohoe,  
John Reynolds, Narayanasamy Ravi, Noel Donlon,  
Hugo Temperley, Brendan Moran

Department of Surgery, St James Hospital, Dublin, Ireland

**Background:** The coronavirus disease (COVID) era has brought with it economic, social and substantial healthcare challenges, none more so than maximising the efficient utilisation of capacity and limit resources and is the premise of this study. St. James's Hospital is a tertiary referral centre for Barrett's endotherapy, but does not have dedicated day case surgery access. Current practice is to book time sensitive cancer operations [such as endoscopic mucosal resections (EMR)] into the earliest available slot.

**Methods:** Data was obtained for every recorded EMR under general anaesthetic over a 5-year period (Jan 2015 to July 2020), EMRs performed in both dayward, and theatre, were recorded along with indication, length of stay, number of repeat sessions and basic demographics.

**Results:** A mean of 40 EMRs (range, 31–45) are performed under general anaesthesia (GA) annually, equating to 3.1 (range, 1–10) monthly. During the COVID era this reduced significantly, with progressively worsening waiting lists. It is postulated that a monthly afternoon would accommodate average EMR burden, with day surgery the ideal place for these types of cases decreasing the financial burden associated inpatient stays and ensuring minimal time spent in the hospital setting for the patient. Similarly, if this session was not to be used it could be reallocated for other

elective day case surgery.

**Conclusions:** The use of unstructured main theatre in patient slots is not effective utilisation of limited hospital resources nor is it cost effective. The solution to this is dedicated slots in dayward and is a safe, feasible and financially sensible alternative.

**Keywords:** Endoscopic mucosal resections (EMR); coronavirus disease (COVID); cost; Barrett's; general anaesthesia (GA)

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### Footnote

*Conflicts of Interest:* The authors have no conflicts of interest to declare.

*Ethical Statement:* The authors are accountable for all aspects of the work in ensuring that questions related to the accuracy or integrity of any part of the work are appropriately investigated and resolved.

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