

Anaesthesia for day case surgery

Our experience at Kyabirwa Surgical Center

Dr Arthur Emoru
(MBChB, MMED Anaesthesia & Critical Care)



Day-care surgery

- Also called Ambulatory surgery
- A patient is discharged from the hospital on the same day of surgery.
- Extended recovery: The patient stays overnight and is discharged the following day.

Kyabirwa Surgical Center

- 983 surgeries so far this year
- Almost 100% discharge to home
 - 4 patients required overnight stay (extended recovery)

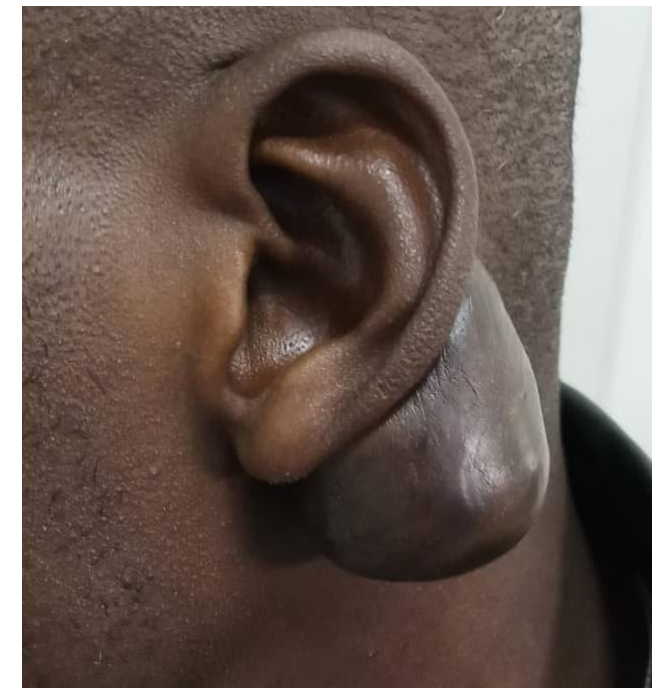
Why day-care surgery

- Cheaper (no admission beds, rooms, overnight staff required)
- Less risk of hospital acquired infections
- Recovery in a familiar environment
- Faster recovery (enhanced recovery protocols)
- More patients can be treated (not limited by number of beds)

What surgeries can be done as daycare

- General surgery
- E.N.T surgeries
- Gynaecology
- Orthopedics
- Ophthalmology
- Urology

With advances in technology and drugs, many more surgeries will be done as day care



Anaesthesia for day-care surgery

- The goal is for the patient to return to **normal feeding, movement and full cognitive ability**, as early as safely possible
- To achieve this we utilize **Enhanced Recovery After Surgery (ERAS)** protocols
- ERAS protocols are **evidence based** components of **multidisciplinary** patient care that are designed to achieve early recovery from major surgery

Patient preparation for day of surgery

- Patient must have a caretaker
- Working phone number (Patient, next of kin, caretaker)
- Where the patient will stay after discharge (depends on type of surgery)
- Phone call a week before the surgery date to confirm that the patient can and will come to the hospital
- Phone call the day before surgery to guide on feeding, time of arrival, caretaker e.t.c

Pre-anaesthetic patient assessment

- Based on ASA (American Society of Anesthesiologists) physical classification system
- Fit and healthy patients are seen on the day of surgery.
- Sicker patients are usually seen days or weeks before the day of surgery



Theatre list organisation

- Prioritize children and elderly first on the list
- Major cases requiring long periods of postop observation done earlier in the day when possible

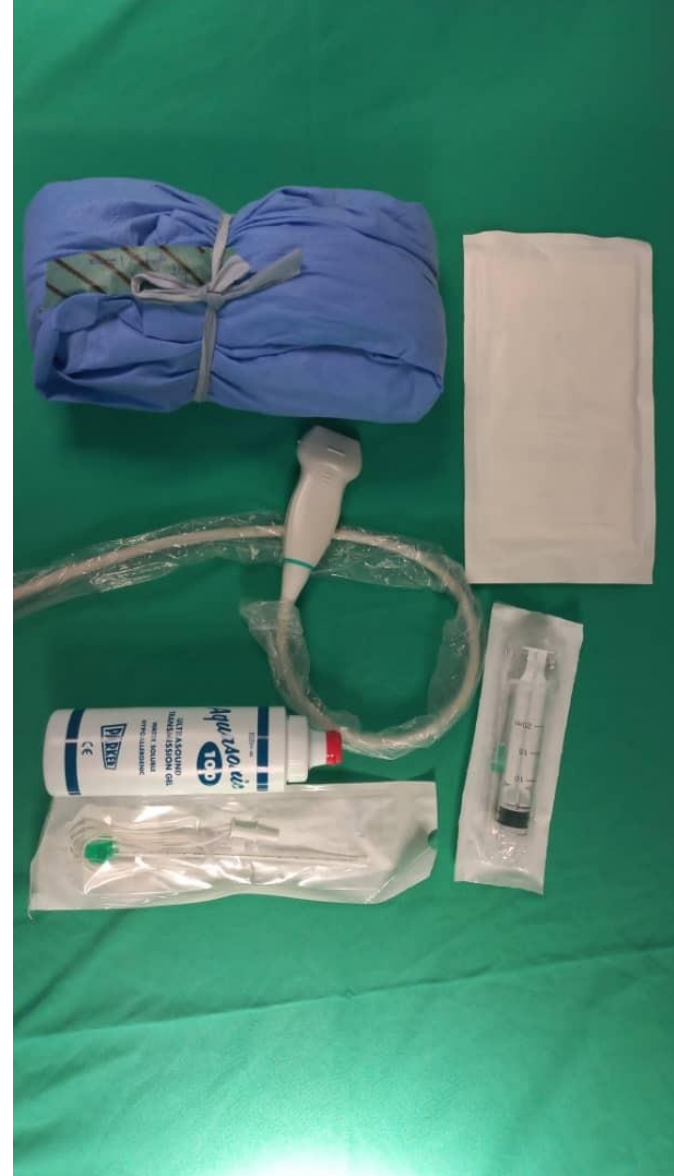
D	67/m	Screening Colonoscopy	Colonoscopy	1	9:00	03
P	68/m	Screening Colonoscopy	Colonoscopy	1	10:00	03
Z	66/f	Screening Colonoscopy	Colonoscopy	1	10:50	03
A	37/f	Breast lump	Excision	11:15	2	Bm
S	55/f	Cholelithiasis	Lap. Cholecystectomy	2:00	1	03
D	22/m	Inguinal Hernia	Mesh Repair	8:40	2	B.m
T	47/m	Right Inguinal Hernia	Mesh Repair	10:00	2	B.m

Anaesthetic technique for day-care surgery

- Preference for regional / local anaesthesia where applicable
- General anaesthesia (GA) with potent short acting drugs e.g. propofol, sevoflurane, fentanyl, etc.
- Combination of regional and general anaesthesia (commonest)
- Sedation



Regional anaesthesia

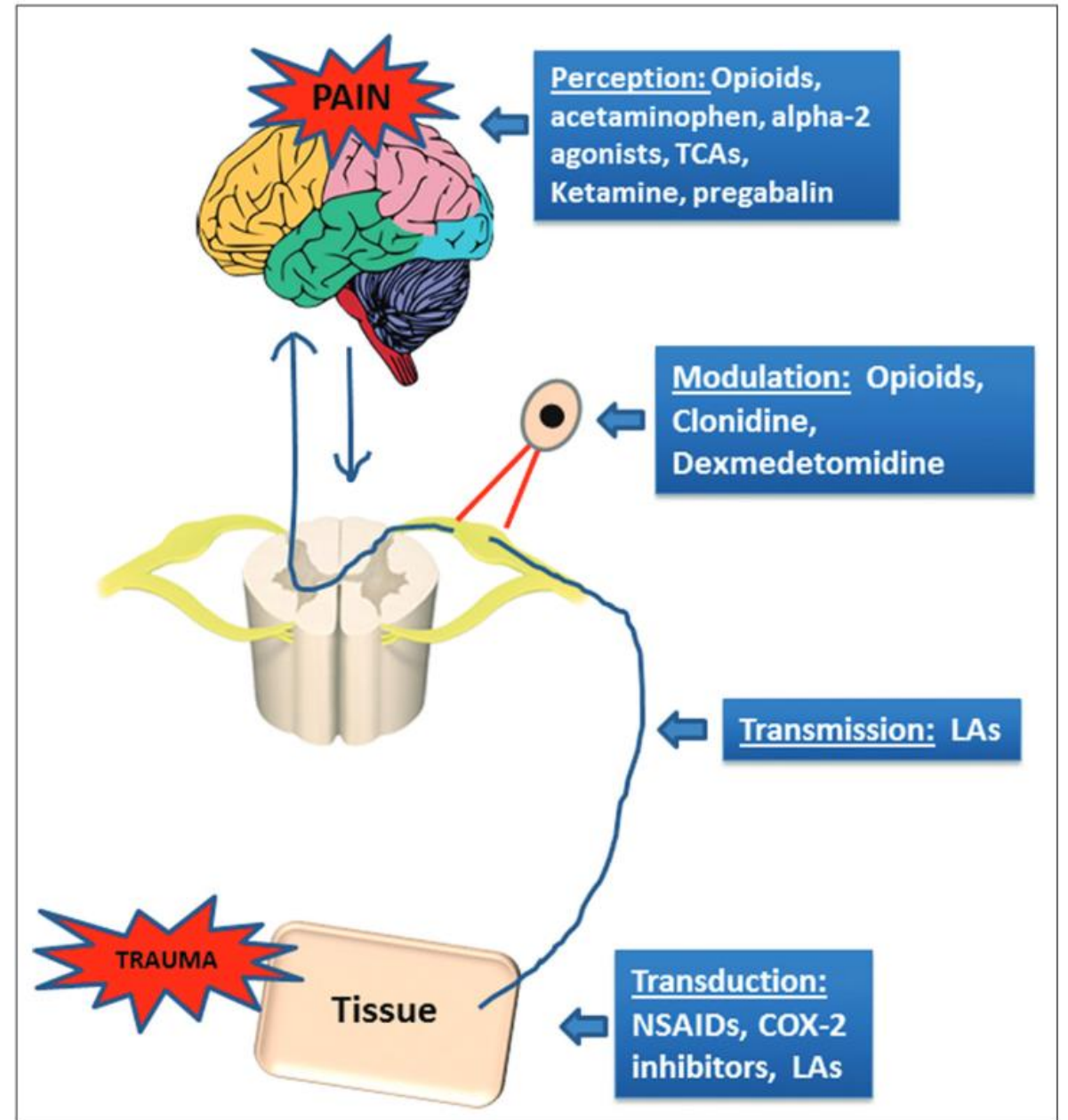


Feeding protocol

- Pre operative fasting guideline
 - Normal supper on night before surgery
 - Clear fluid on the day of surgery till 2 hours before procedure, e.g. “sweet dry tea”
- Early resumption of feeding after surgery

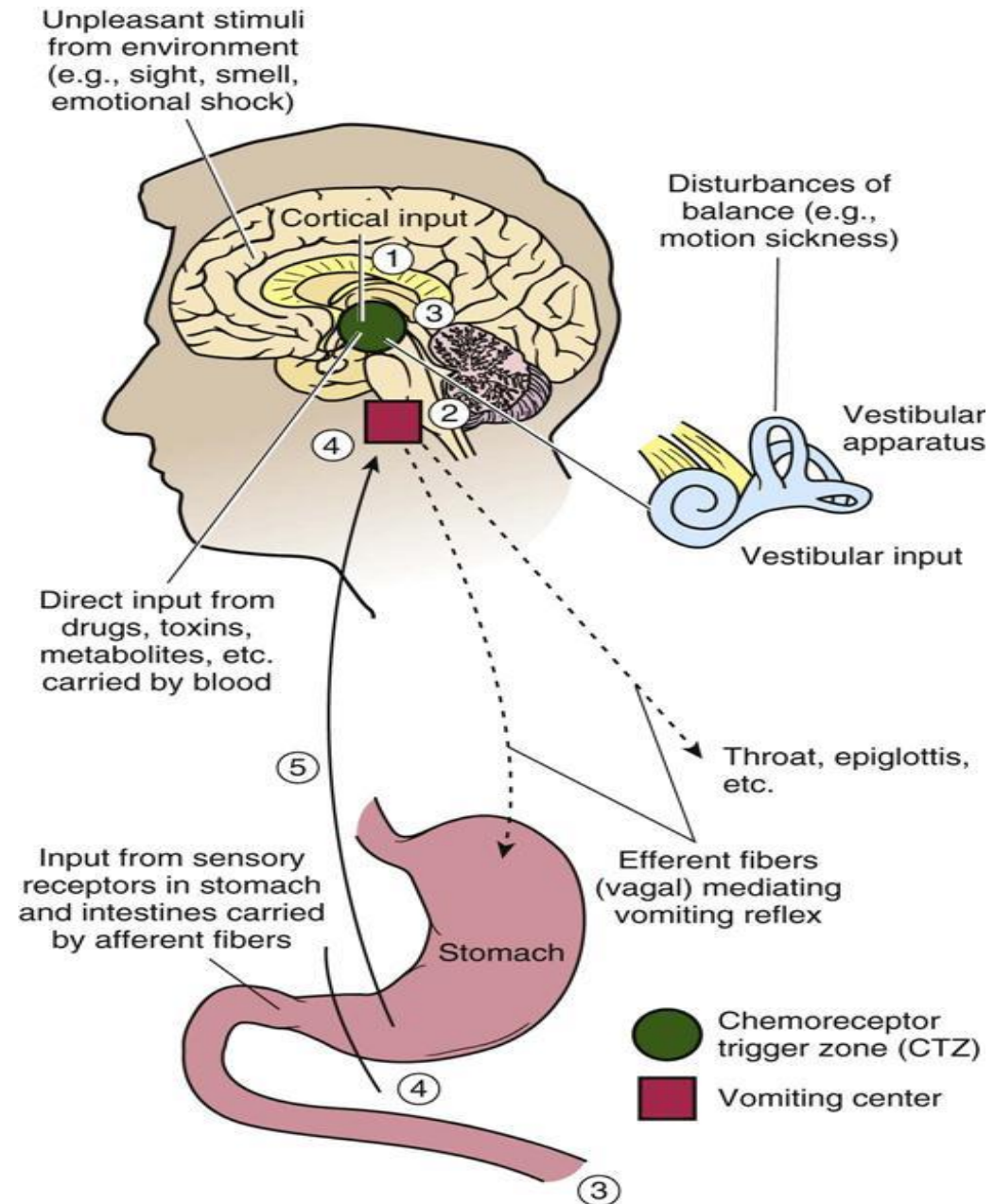
Multimodal Analgesia

- Using painkillers that work differently together is more effective than using one type of painkiller.
- E.g. Etoricoxib + Paracetamol + paravertebral nerve block, aceclofenac + paracetamol + ilioinguinal/iliohypogastric nerve block



Post Operative Nausea & Vomiting (PONV)

- Prophylactic approach
- Multimodal drug therapy
- E.g. Metochlopramide + Dexamethasone + Ondasetron



Discharge protocol

- Post Anaesthesia Discharge Scoring System (PADSS) discharge criteria, modified for our unit
 - Vital signs, ambulation, PONV, Pain, Surgical bleeding, Urination
- Able to drink/eat (when applicable)
- Home location (will have been confirmed preoperatively)
- Presence of a caretaker
- Phone contacts (Patient, Next of Kin, Caretaker)
- Mode of transport used when returning home?
- Medication and feeding instructions
- Contact of field nurse





Home follow-up

- Hospital contact for follow-up is reachable 24/7
- The patient is called on post operative days 1 and 3.
- Home visit by field nurse done depending on
 - Type of surgery
 - Findings of followup phone call
- Hospital visit on postoperative days 5-7





Tel: **+256 393236865**

Email: info@kyabirwasc.org

Website: www.kyabirwasc.org

Questions