

AB116. Adequacy of post-operative symptom management after day-case surgery

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Background: An increasing number of progressively complex surgeries are being identified as suitable for “day-cases”. The Royal College of Anaesthetists (RCOA) proposes targets of best practice with regard to managing symptoms, chiefly pain and nausea post-discharge. Our centre provides a standard three-day discharge prescription (paracetamol 1 g + codeine 60 mg qds/tds, diclofenac 50 mg bd prn, and cyclizine 50 mg tds prn) to all day-case patients, and our goal was to evaluate whether this was appropriate for their needs.

Methods: Between the 19th and 23rd of November 2018, we audited 56 patients presenting for day-surgery in Tallaght University Hospital (TUH). Patients were consented for inclusion on the morning of procedure, along with a demonstration of a visual analogue pain scale. They

were contacted at 48 hours post-discharge and asked about their symptoms during that time.

Results: Forty-seven patients were contactable at 48 hours post-surgery (3 of these were excluded due to re-admission). The 100% of patients received the standard discharge prescription and written advice. Twelve/43 (27.9%) had experienced “severe” pain (7/10 or higher). Six/43 (13.95%) suffered nausea, with 1 although only one had felt necessary to use their anti-emetic. And 39/43 (90.70%) reported they were either “satisfied” or “very satisfied” to be treated as a day case.

Conclusions: The above data demonstrates there is a need to improve the management of symptoms post day-surgery in TUH. Whilst it is a positive that 100% of patients were provided with a prescription, 27.9% of patients suffering severe pain is well above the rate of <5% recommended by the RCOA. However, it is important to note that 6 (50%) of these patients had either not collected, or not used their analgesia as prescribed. A re-audit will take place this year following a re-design of the prescription and advice document.

Keywords: Analgesia; day-case; nausea; pain; surgery

doi: 10.21037/map.2020.AB116

Cite this abstract as: McKeon DJ, Conroy P. Adequacy of post-operative symptom management after day-case surgery. *Mesentery Peritoneum* 2020;4:AB116.