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Overstay and readmission in day surgery – comparison of ear, nose and throat and orthopedic patients

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Introduction

All over the world increasing numbers of procedures are carried out as day surgery. We set out to investigate ear, nose and throat (ENT), orthopedic and hand (OHS) day surgery at Helsinki University Hospital. Most of these procedures are carried out under local or regional anesthesia in Finland, whereas, in many other countries, general anesthesia is preferred.

Objectives

We examined the overstay and readmission rates in day surgery with a special focus on the effect of local versus general anesthesia. Unscheduled contacts not leading to readmission are also reported.

Methods

We conducted a retrospective study on all ENT and OHS day surgery patients within a 3-month period in a public tertiary hospital, using the hospital's surgery database and patient charts to collect data pertaining to anesthesia, overstays, readmissions and contacts within 30 days of day surgery.

Results

The overall readmission rates were 1.38% (ENT) and 1.11% (OHS), overstay 1.97% (ENT) and 0.74% (OHS) and contact rates 14.69% (ENT) and 9.04% (OHS). Of ENT overstays and readmissions, 16/20 overstays and 12/14 readmissions involved general anesthesia. Of 149 contacts, 86 contacts (57.7%) occurred amongst general anesthesia patients. The majority of OHS procedures were performed under regional or local anesthesia. Of the four OHS overstays and six readmissions, all overstays and three readmissions involved general anesthesia. Eleven out of 49 OHS contacts involved general anesthesia patients.

Conclusion

Our overstay, contact and readmission rates are on the same level, or lower, than in international studies. Our findings suggest that more day surgery patients could be treated safely using local or regional anesthesia.