The need of blood transfusion during emergency laparoscopic appendicectomies: a quality and cost improvement project QIP/CIP

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Abstract

Aim:

a) Identify the number of patients that required blood transfusion during laparoscopic appendicectomy in our Hospital the last 10 years.
b) Is G/S really required before emergency laparoscopic procedures according to literature evidence?
c) What is the quality/ cost impact of this practice as well as financial and time impact of rejected/duplicated samples?

Method:

2. Sample size and time period: 1288 patients adults and children >5 years old that had emergency laparoscopic appendicectomy the last 10 years in Worthing Hospital.
3. Sample collection: consecutive and time sampling
4. Data analysis: Incidence of blood transfusion, no need for complex statistical analysis.

Results:

Only seven patients were recorded as having had blood transfusion: 1) Two patients over 70 years old postoperative blood transfusion due to other co-morbidities, 2) Two no electronic record of transfusion 3) Two patients transfused other blood products such as FFP’s for INR inversion and coagulation problems, 4) One patient had caecal tumour, transfused for anaemia and had later right hemicolecotmy.

Conclusion:

Our results show that none of our patients needed intraoperative blood transfusion for vascular injury. Major haemorrhage protocol can be used when needed. We will use those data for cost improvement project.

Biography:

Kallis Sideri is affiliated from Western Sussex Hospitals, and also present working in the Worthing Hospital NHS Foundation Trust, United Kingdom

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