

Unanticipated admission following elective day surgery laparoscopic cholecystectomy. A retrospective study of quality of care.

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Study Program in Medicine

KI Degree project 30 credits

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Introduction: Today over half of surgical operations in Sweden are performed as day surgery. Laparoscopic cholecystectomy is a common operation performed as day surgery. Unanticipated admission measures the main goal of day surgery which is same day discharge of the patient.

Aims: To decide the incidence of unanticipated admission, evaluate possible predictive factors and quantify complication type and frequency after laparoscopic cholecystectomy. *Material and Methods:* 437 cases of elective day surgery laparoscopic cholecystectomies were identified in the local Swedish perioperative register. Demographic and perioperative data was collected retrospectively. Unanticipated admission incidence and complications were quantified and predictive for unanticipated admission were analysed for statistical significance. *Results:* We found 55 cases of unanticipated admission, corresponding to an unanticipated admission rate of 12.6%. Operation time over 1 hour ($p = 0.006$). The three most common complications were severe pain (75 cases), severe nausea (62 cases) and urinary retention (9 cases). The complications could be handled in 77%, 70% and 67% respectively without leading to unanticipated admission.

Conclusions: The rate of unanticipated admission is comparable to earlier studies, adverse events can be handled adequately, quality of care is excellent and laparoscopic cholecystectomies can be performed safely in a day surgery setting.

Keywords: Unanticipated admission, Day surgery, Laparoscopic cholecystectomy, Adverse events.