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Value of a Specialized Clinic for Day Admission Surgery for Cardiac and Major Vascular Operations

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The preoperative evaluation has a critical role in the perioperative care of day admission surgery (DAS) patients for cardiac and major vascular operations (CVO). Due to increased volume of patients, who are older, need reoperations, and have multiple comorbidities, we opened a specialized preoperative clinic (SPC) only for CVO.

Methods: After a survey of 76 institutions, we opened in April 2006 a separate SPC designed for CVO. The clinic is located near the cardiac catheterization suite to allow for evaluation of those needing urgent surgery and also near the CICU. The team was assembled: cardiac anesthesiologist, CICU nurse, and nurse practitioner.

Patients are seen 3 to 7 days prior to DAS. Before the appointment all previous medical reports are collected. Evaluation in the SPC involves a detailed history and physical examination, acquisition of the additional necessary tests, performance of medical reconciliation, and discussing with patients and their families all information about hospitalization, surgery, CICU stay, and pain management. Collected data are sent to the cluster of operating room for review by the anesthesiology team. OR staff are given all pertinent information for review and for determining needed interventions to be ordered in advance (eg, motor evoked potential, nitric oxide). On the day of surgery the patient is admitted to the SPC, an immediate assessment is performed, and IV antibiotic prophylaxis is started.

Results: Our computerized data from January 2007 to September 2009 included 2,504 patients (average age 62.1 years, 44.5% female). 1,004 were undergoing mitral valve surgery. Ninety-two patients (3.7%) were seen in the cardiac catheterization suite for urgent surgery. There were 36 cancellations (1.4%) for medical and logistical reasons, and 52 patients were evaluated twice.

Discussion: Our data show that a SPC for CVO patients scheduled for DAS is feasible and provides numerous safety and cost-containment benefits. We believe that a complete preoperative evaluation of these complicated patients benefits not only patients and their families but all medical personnel as well, as it creates efficiency and harmony during the entire hospitalization.

Flynn BC, de Perio M, Hughes E, Silvay G. The need for specialized preanesthesia clinics for day admission cardiac and major vascular surgery patients. Semin Cardiothorac Vasc Anesth 2009; 13:241–248.

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