

445 Review of Restarting Elective Surgical Service in District General Hospital Post COVID 19

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Aim: National Health Service (NHS) has massively reduced non-urgent elective surgical service as COVID-19 hit the UK. This study aims to evaluate the measures taken by our trust to restart elective surgical work which was suspended due to the COVID-19 pandemic.

Method: This is a single centre, retrospective, observational study. We analysed records of the first 100 patients who underwent any type of elective General Surgical operative procedure since June 2020.

Results: Our cohort included 51 female, and 49 male patients. Youngest patient was 19 years old and the eldest was of 86 years with mean age of 55.5. In our group, 16 patients were ASA grade 1, 57 were ASA 2, 26 ASA 3 and 1 patient was ASA grade 4. The median ASA grade among our patient group was 2. In this study shortest hospital stay was of 1 day and longest of 53 days with average stay of 5.2 days and SD of 7.6. In our cohort, 18 patients developed Grade 2 Clavien-Dindo (CD) Complications, 6 patients developed Grade 3 and none developed complications of CD Grade 4 or beyond. Repeat COVID-19 tests for all patients staying over 7 days were negative.

Conclusions: In conclusion, through appropriate isolation and with adhering to trust guidelines, restarting of elective surgery in non-covid free hospital compound via separate pathways are feasible and should be reflected upon before stopping all elective surgical services in the future considering the threat of further waves of covid-19 or the new variant of the virus looks very real.