## 281 Evaluating a Diagnostic Algorithm for Adult Appendicitis – A Quality Improvement Project

B.E. Zucker  $^{1,2},$  F. Loro  $^2,$  A. Tyer  $^2,$  J. Shabbir  $^2,$  M. Finch-Jones  $^2,$  N. Blencowe  $^{2,1}$ 

<sup>1</sup>University of Bristol, Bristol, United Kingdom, <sup>2</sup>UH Bristol NHS Foundation Trust, Bristol, United Kingdom

**Introduction:** Diagnosing appendicitis remains challenging, despite being the most common surgical emergency. We conducted a single-centre mixed method quality improvement project to assess the validity of a diagnostic algorithm for appendicitis and the diagnostic impact of increasing cross-sectional imaging during the Covid-19 pandemic.

**Method:** Adult histology reports and preoperative imaging data were retrospectively retrieved for patients operated on between 1/7/19-31/ 12/19 ('baseline data') and an appendicitis diagnostic algorithm was developed.

Imaging and risk stratification data were prospectively collected, as part of a national audit, between 20/03/30-23/6/20 for all adult appendicitis patients. This data was used to evaluate the efficacy of the proposed diagnostic algorithm.

Use of imaging and histological diagnoses was compared between datasets.

**Results:** 194 patients were included across both time periods. The rate of cross-sectional imaging increased from 36.6% to 76% and the normal appendicectomy rate (NAR) decreased from 5.22% to 2.4%. Thirty-six percent of patients in the latter time period were not managed in accordance with the proposed algorithm. The proposed diagnostic algorithm may have prevented up to 87.5% of normal appendicectomies across both time periods.

**Conclusions:** Increasing cross-sectional imaging was associated with a decrease in the NAR. The use of the proposed diagnostic algorithm may have reduced the NAR further.