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541 Pre-Operative Assessment of Patients Undergoing Elective TURBT or Rigid Cystoscopy + Bladder Biopsy: Is a Group & Save Clinically Required?

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Aim: Group & Save (G&S) is conducted prior to Transurethral Resection of Bladder Tumour (TURBT) or Rigid Cystoscopy + Bladder Biopsy (BB) during pre-operative assessment (PoA). Each G&S costs £7.54 and 2 samples are required. The aim of this audit was to determine whether G&S is clinically required for these two procedures.

Method: This two-cycle audit reviewed the PoA components of patients undergoing TURBT or BB over a 6month period prior to the COVID-19 pandemic (July-Dec2019), in which PoA were face-to-face, and a subsequent re-audit during telephone PoA (July-Dec2020), where it was deemed unnecessary to have a G&S.

Results: 1st Cycle: 64 patients were included, 32.8%(21/64) had a preoperative G&S. 98.4%(63/64) had Hb measured. Mean Hb was 131.56 (79 – 165) g/l. 25%(16/64) were on anti-coagulants, of which 50%(8/16) were continued. No patients required a peri or post-operative blood transfusion.

2nd Cycle: 48 patients were included and 6.25%(3/48) had a G&S within the 1 month preceding their operation. 70.8%(34/48) had their Hb measured, with mean Hb being 135.18 (86 – 168) g/l. 22.9%(11/48) were on anticoagulants, of which 36%(4/11) were continued. There were no complications requiring a blood transfusion.

Conclusions: We found no requirement of blood transfusions following TURBT or BB, therefore routine G&S is not clinically indicated for this series. This reflects departmental savings of £964 over 6months (based on 64 cases). In addition, a relationship between continuing anti-coagulation or a low Hb and post-operative transfusion was not observed.