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Pre-operative assessment clinics could reduce cancellations and risks say anaesthetists

***Specialist nurses and GPs have a key role to play in multi-disciplinary approach***

All hospitals are being urged to set up pre-operative assessment clinics to reduce cancelled operations and ensure that risks are minimised when patients undergo surgery.

The Association of Anaesthetists of Great Britain and Ireland has expressed concerns that operations are being cancelled, often at the last minute, because forward planning is not always as good as it should be.

They are also worried that lack of NHS funding for pre-operative assessment services means that patients do not have the chance to ask questions, raise concerns and receive advice on maximising their general fitness before surgery.

“It is vital that anaesthetic doctors have the opportunity to assess patients before their operation to ensure that any risks are minimised during surgery” says Dr Ranjit Verma, Chair of the working party behind the AAGBI's new guidelines Pre-operative Assessment and Patient Preparation – The Role of the Anaesthetist.

“Some hospitals already provide pre-operative assessment clinics, but provision of these services is patchy and in many cases the only chance the anaesthetists get to see the patient is on the day of the operation.”

The AAGBI says anaesthetists can work with skilled nurse practitioners to provide a safe and cost-effective system to prepare patients for anaesthesia. General practitioners are also an essential part of the team, as they can help patients to optimise their fitness before surgery. This help can include stopping smoking, losing weight and optimising treatment for any concurrent medical problems.

“For example, if we find a patient has high blood pressure, they need to be referred back to their GP so that their blood pressure can be brought under control before they can undergo anaesthesia safely” says Dr Verma. “If someone has already
waited months for an operation, this can be very distressing for the patient and frustrating for healthcare and theatre staff."

As well as advising patients on their general fitness, GPs should ideally work with hospital pre-operative assessment services to optimise treatment of chronic conditions such as diabetes and anaemia.

“Pre-operative assessment clinics are increasingly important as more and more patients are coming in as day surgery cases” says Dr Verma.

“Patients often have other illnesses as well as the condition that brings them to hospital for surgery and these require careful management. Preparation for surgery may take weeks to achieve and could lead to delays and cancellations if the pre-operative assessment has not been carried out in a thorough and timely fashion.

“If surgery needs to be cancelled at the last moment, it is not good for the patient and it wastes resources, such as highly trained staff, theatre time and waiting lists.”

Research carried out by the Healthcare Commission (HCC) in 2005 found that almost half of day surgery patients were not being pre-assessed for their operation before they arrived for their procedure. The HCC also stated that cancellation rates at some day surgery units exceeded 20 per cent and that by working more efficiently the NHS could treat a further 74,000 patients - 10 per cent more - using day surgery.

“The AAGBI believes that each hospital should have a lead anaesthetist who is responsible for working with senior managers to establish a comprehensive and integrated pre-operative assessment service” says Dr Verma.

“As well as setting up pre-operative clinics and including specialist nurses and GPs in the multi-disciplinary team, the lead anaesthetist should also establish clear pathways of care for unplanned admissions with medical and surgical colleagues, emergency departments, critical care and theatre personnel.”

Dr Verma points out that effective communication and a team approach are vital in the pre-operative period.

“Complications and malpractice lawsuits are often attributable to poor preparation and failure in communication” he says.

“The guidance just issued by the AAGBI provides a comprehensive analysis of the need for efficient pre-operative services and advice on the practical steps and procedures that need to be adopted.

“However, it is not just an issue for anaesthetists. An effective pre-operative assessment service is only possible if there is sufficient funding and management support. We also need primary care services to work with hospital staff to ensure that patients are as ready as they can be for surgery."

The guidelines can be accessed online at: http://www.aagbi.org/news.htm#89
Notes to editors


• **The Association of Anaesthetists of Great Britain and Ireland** is the leading representative body for anaesthetists in the UK and overseas and is one of the UK’s largest single grant providers for anaesthetic research. It currently has over 10,000 members. www.aagbi.org

• **Anaesthetists** are specialist doctors involved in the care of two-thirds of all hospital patients. Their expertise extends beyond the main operating theatre to acute and chronic pain management, leading resuscitation teams, managing Intensive Care Units, working in maternity units, accident and emergency departments and radiology, the care of some dental patients and the transfer of critically ill patients.