

Cardiothoracic
Surgery
Department

Improved patient outcome by reduction in post-operative bleeding and length of stay in cardiac surgery patients

Description

During analysis of the data for cardiac surgery performed at the Heart Hospital during 2012, it was noted that the rate of return to theatre for bleeding was 9.5% (international guidelines give rates varying between 5% and 10%). We felt that our rate was too high. Also the average length of stay in the hospital post-operatively was 10.4 days (median 7, mode 6), again we felt this was too high.

Aim

Our aim was to reduce the rate of reopening closer to 5% for 2013, and to reduce the post-operative length of stay.

Actions taken

We became more careful with any pre-operative drugs that make bleeding more likely (aspirin, clopidogril, heparin). We tried harder in theatre to control any bleeding before the patient was transferred to the intensive care unit and were more vigilant of any post-operative bleeding and quicker to start any measures to control this. We changed the policy of keeping patients in the intensive care for the first 48 hours to 24 hours only if the patient was stable.

Results

For all cardiac cases for 2012 the rate of return to theatre in the first 24 hours was 9.5%. For 2013 the rate is 5.49%. The average post-operative length of stay is now 8.1 days (median 6 and mode 6).

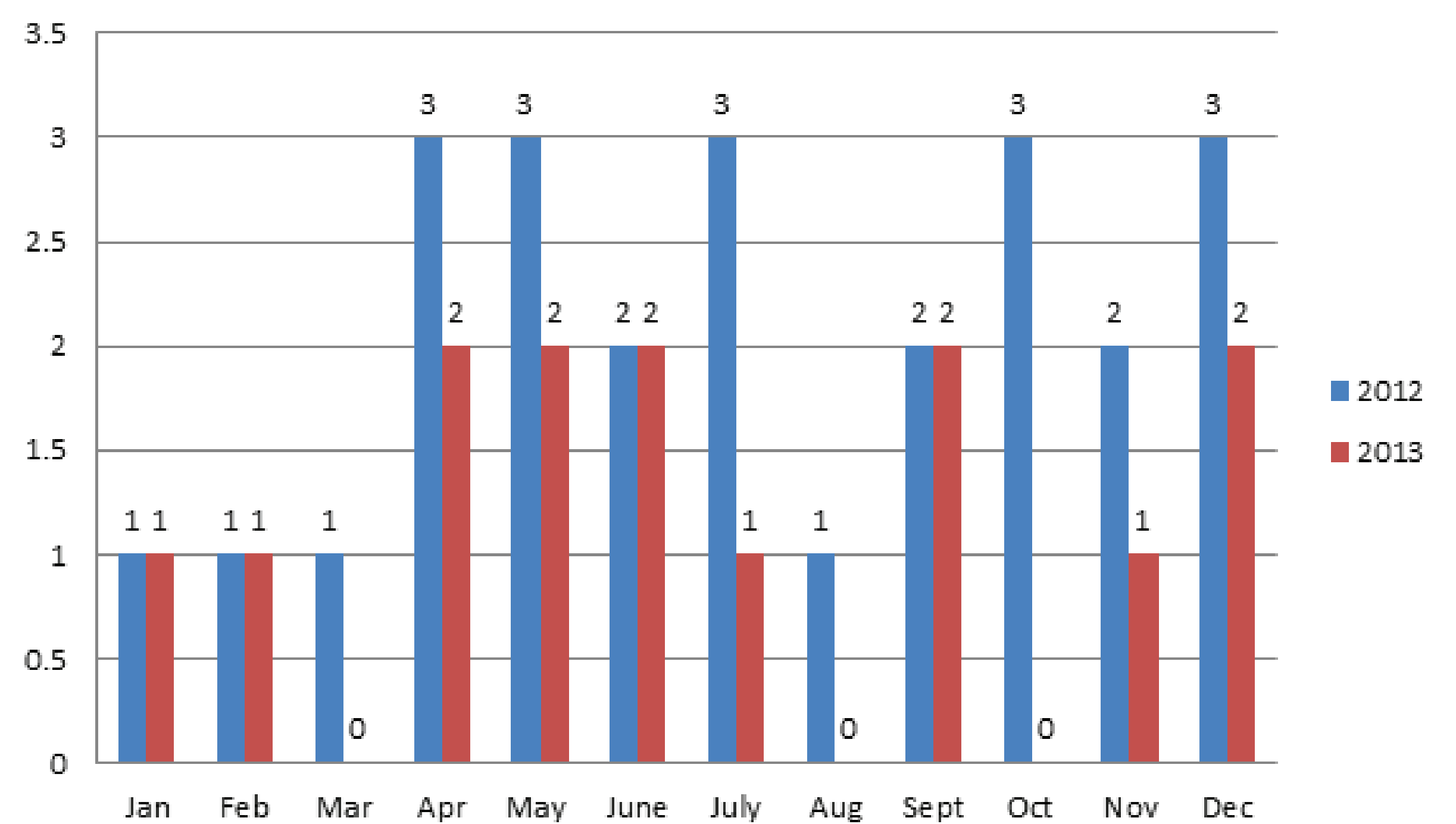


Figure1: No of patients returning to theatre per month.

Our new data collection system has allowed us to identify areas of practice that needed improvement. We introduced changes that have lead to beneficial outcomes for patients undergoing cardiac surgery at the Heart Hospital.