The Introduction of the Day Case Total Laparoscopic Hysterectomy (TLH) at Gold Coast University Hospital

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Introduction
Traditionally Total Laparoscopic Hysterectomy (TLH) patients are admitted for 1-2 days post-operatively. Day Case TLH has been proven to be feasible and safe in other countries, however Gold Coast University Hospital (GCUH) is the first Australian institution to introduce a Day Case TLH protocol.

Aim: To determine the feasibility, safety and patient satisfaction of same-day discharge for TLH patients at GCUH.

Methods
A single-centre prospective cohort study of 77 TLH patients. Prospective data was compared to retrospective cohort data of 81 patients who underwent a TLH prior to implementation of the Day Case TLH protocol.

• Primary outcome - length of post-operative hospital stay.
• Secondary outcomes - peri-operative complications and post-operative representation rates.
• Patient satisfaction of the prospective group was assessed through a patient questionnaire.

Main Components of the Day Case TLH Protocol at GCUH

Pre-operative points:
• Setting patient expectation: patient education and video
• Provision of a continuity of care clinical nurse

Anesthetic points:
• Multi-modal non-opioid analgesia
• Avoiding long-acting sedatives
• Use of anti-emetics
• Ensuring adequate hydration

Surgical technique points:
• Same consultant present (operating or assisting)
• In-out catheter only
• 3-4 5mm ports only (unless morcellation required in which case left iliac fossa port is changed to 15mm)
• Minimal opening of peritoneal spaces and dissection

Post-operative points:
• Continued expectation for home with dedicated recovery team
• Ongoing utilization of the continuity of care CNC
• Trial of void prior to discharge
• Scripts provided for analgesia and antiemetics
• Follow-up via telehealth on days 1, 3 & 6 post-operatively with CNC, and then at 6 weeks (telehealth/in person)

Results
• Home same day: 94.81% of prospective patients
• Primary outcome: Average length of post operative stay
  Propective group: 7.72 (SD ±3.36) hours
  Retrospective group: 35.63 (SD ±18.11) hours
• Secondary outcome: there were no significant difference in peri-operative complications or representation rates
• Patient satisfaction: 96% reported care above or well above average, and 88% likely or highly likely to recommend a Day Case TLH.

Conclusion
• Significant reduction in length of post operative hospital stay with no significant difference in peri-operative complications and post operative representation rates.
• Reduced length of hospital stay results in reduced use of hospital resources which can have a positive impact to the healthcare system especially in times such as the COVID pandemic.
• Standard of care does not suffer in patients who opt to undergo day case TLH at GCUH.
• This protocol shows extremely satisfied patients who have thorough and improved post operative care by a designated team who offers continuity of care to the patient.

References

