

Introduction

Laparoscopic cholecystectomy (LC) is a common daycase procedure. The British Association of Day Surgery (BADS) Procedure Directory sets out national performance targets for the number of LC's treated as day cases. This study aimed to assess if operation time predicted unplanned inpatient admission.

Methods

An anonymised retrospective review of all patients undergoing LC. The data was undertaken over two cycles. The first cycle was a 6-month period followed by a second cycle that was undertaken over three months. Data was obtained from multiple sources: discharge letters and the theatre data manager.

Results

Total number of cases included was 160. In the first cycle, 113 LC's were performed over a 6-month period, 5 (4%) were planned admissions. The zero night stay for DCLC was 56%, which lies within the top 50% of current national performance but is below the BADS target of 75%. Of the planned DCLC there were 47 (42%) unexpected admissions. The unexpected admission and zero stay groups were well matched in age and gender. Average age 54 (22 to 87) with 76% female in the zero stay group compared to 51 (18 to 81), with 77% female in the unplanned admission group. In the day zero stay group. 3 (10.4%)