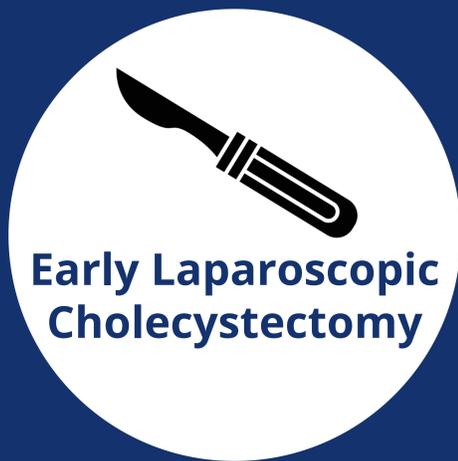


Acute Cholecystitis at Dunedin Hospital

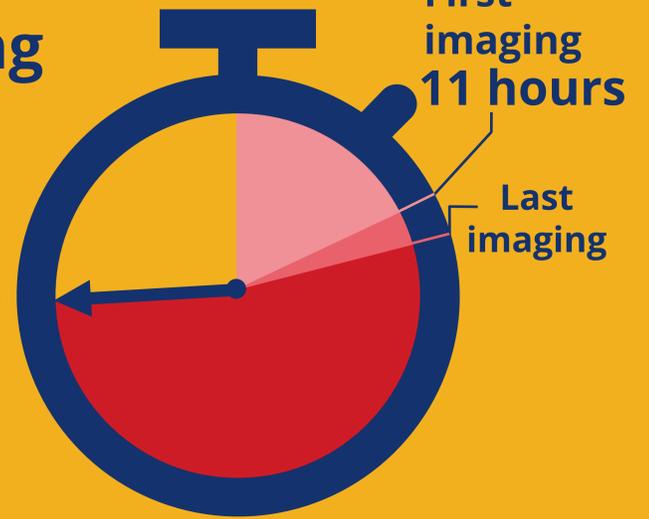
An Audit of Hospital Stay of Patients Treated with Cholecystectomy



2016 – 2019



**Waiting
Time**



**Operation
44.75
hours**



**310
Bed Days/Year**

56
Median Age

57%

**NZ
European**

75%

Introduction. Acute cholecystitis (AC) is a common presentation in our institution. We aim to treat patients with AC with early laparoscopic cholecystectomy (ELC). However this places a burden on the inpatient bed resource.

Aim. To measure the inpatient length of stay for patients requiring ELC at Dunedin Hospital with a view to identifying opportunities to reduce the burden on the inpatient bed resource.

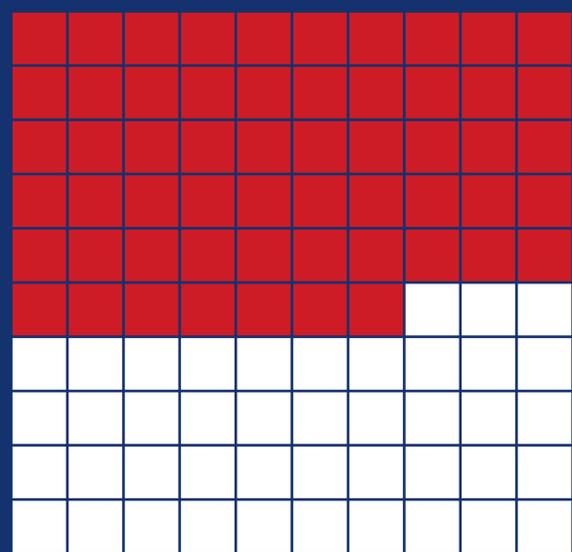
Methods. Using the prospective, validated Otago Clinical Audit (DIVA) database, we searched for adult patients aged ≥ 18 years admitted with a primary diagnosis of AC and treated with ELC between January 2016 and December 2019. The electronic patient record was then checked to ensure the diagnosis of AC was consistent with current guidelines. Disease severity was stratified according to the Tokyo guidelines. We excluded patients who required pre-op ERCP or who had concurrent factors precluding immediate fitness for surgery.

Results. 276 patients over 4 years were included, with 57% female, median age 56 years, and 75% NZ European. 54% had mild AC. Total bed days was 1239. The median time from presentation to operation was 44 hours. Median postoperative length of stay was 1 day. If an ambulatory care pathway was implemented whereby patients with mild AC were imaged acutely without admission and booked onto an acute day case theatre list, potentially 530 bed days could be saved.

Conclusions. In our institution, patients receiving early laparoscopic cholecystectomy for AC total approximately 310 bed days per year. However, simply reducing the inpatient length of stay is unlikely to significantly reduce the burden on the inpatient bed resource. An ambulatory care pathway for mild AC patients could bring a greater opportunity to reduce inpatient bed days and improve overall patient experience.



**Ambulatory
Pathway
Mild Cholecystitis**



**133
Bed Days Saved**