



Service Priorities and Programmes Electronic Presentations

Convention ID: 934

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Discharge Destination after Cardiac Surgery and 'International Benchmarking' of Length of Hospital Stay

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Keywords:

Post CABG Length of Stay

Post CABG discharge Destination

'International Benchmarking' of Length of Hospital Stay

Introduction

Length of hospital stay following surgery is purported as a 'quality' measure but can be impacted by local facilities for rehabilitation and other amenities. Benchmarking is an important component of quality assurance programmes and The European Society for Cardiothoracic Surgery (ESCTS) Database includes data from over 29 countries in Europe, 50 hospitals from mainland China and outcomes for over 1 million cardiac procedures.

Objectives

To look at discharge destinations following cardiac surgery in a single institution and benchmark hospital stay (following coronary surgery, CABG) with the ESCTS Database, including data from mainland China.

Methodology

Prospective data collection for all cardiac surgical activity within our Division was instituted and stored in a dedicated cardiac database. For discharge destination, data was collected for all surgical activity from 2006-2011 inclusive (1899 cases). For benchmarking, data was independently and remotely extracted from our server by representatives of the ESCTS for the period 2006-8 inclusive for CABG patients only. Benchmarking was performed independently by ESCTS and is presented as mean length of hospital stay and inter-quartile ranges.

Result

Data from 1899 CUHK/PWH patients showed 1839 patients survived to discharge (96.8%). Of these, 1482 patients (78%) were discharged directly to home. 1.5% (29 patients) were admitted to convalescence facility and 306 (16.1%) were discharged to another hospital (referring center). 21 patients discharged home from PWH (1.1%) had been transferred to another specialty within PWH prior. ESCTS benchmarking showed CUHK/PWH post-operative stay following CABG (n=502) was mean 6.7 days (IQ range 3-8), whole database, n=208156, 10.0 days (IQ range 2-21) and Asian

Zone, n=8768, 12.6 days (IQ range 3 -24)