F-P1.33

Evaluate the Outcome of Developing a Clinical Pathway on Male Acute Urinary Retention (AUR) in the Accident and Emergency Department & Urology Centre

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(I) Introduction

- Acute urinary retention (AUR) is a painful and distressing condition
- Common in males and requires urgent management
- Around 250 300 patients / year admitted in QMH via AED
- Length of stay: 2-3 days / patient
- Hospital fee: HK\$ 4,680 / day (HK residents only need to pay HK\$100 / day of hospital stay + HK\$ 50 administrative fee / admission, so the remaining HK\$4,530 will be subsidized by HK Government)
- About 1,660,000 discharge episodes in public hospitals in 2015

(The Information Services Department, HKSAR, GovHK website: http://www.gov. hk)

Heavy financial burden

(II) Objective

- 1. Prevent unnecessary hospitalization
- 2. Relieve financial burden on hospitals and government







(III) Methodology (1)

Inclusion Criteria:

- 1. Male patients
- 2. Aged ≥ 50
- 3. Cognitive intact
- 4. Insertion of urethral catheter in AED without underlying problem
- 5. Eligible patient agrees to join the pathway

Exclusion Criteria:

- 1. Female
- 2. Febrile patient
- 3. Failed urethral catheter insertion in AED
- 4. Urine $> 1000 \text{ ml or } < 250 \text{ ml } (1^{\text{st}} \text{ cath})$
- 5. Urine > 250 ml/hour for 2 consecutive hours after urethral catheterization
- 6. Recent episode of gross haematuria
- 7. Blood creatinine level > 150 umol/L
- 8. Eligible patient refuses to join the pathway

Eligible patients are all recruited for the clinical pathway

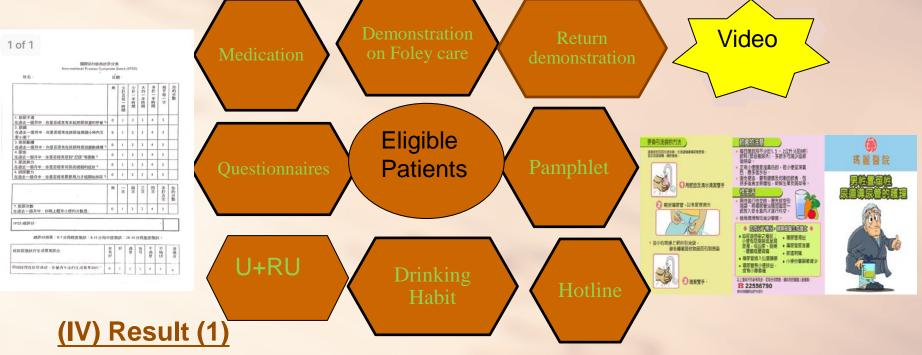








(III) Methodology (2)



- Total 163 eligible patients were recruited during the period of Jan 2013 to Dec 2015
- Mean age: 72.1 ±8.5 years

Location	Median length of stay (number of hours per patient)	Cost (HK\$) per patient
Urology Centre	5	60 (by patient)+ 1,050 (subsidy by HKSAR)
Ward	60	350 (by patient) + 13,690 (subsidy by HKSAR)









(IV) Result (2)

- The mean IPSS score: 16.7 ± 8.9 (moderately symptomatic)
- The mean QoL score: 3.4 ± 1.4 (mixed feelings)
- Among 33 % failed TWOC, there were 46 patients (85.2%) had TURP done

Trial without catheter (TWOC)



(V) Conclusion

- Significantly relieve the financial burden (\psi \psi \psi 13 times) on our hospital and government
- 67 % patients could successfully trial without catheter

• 85.2 % patients who failed TWOC had fast track surgery (TURP) done after recruited in this

clinical pathway









