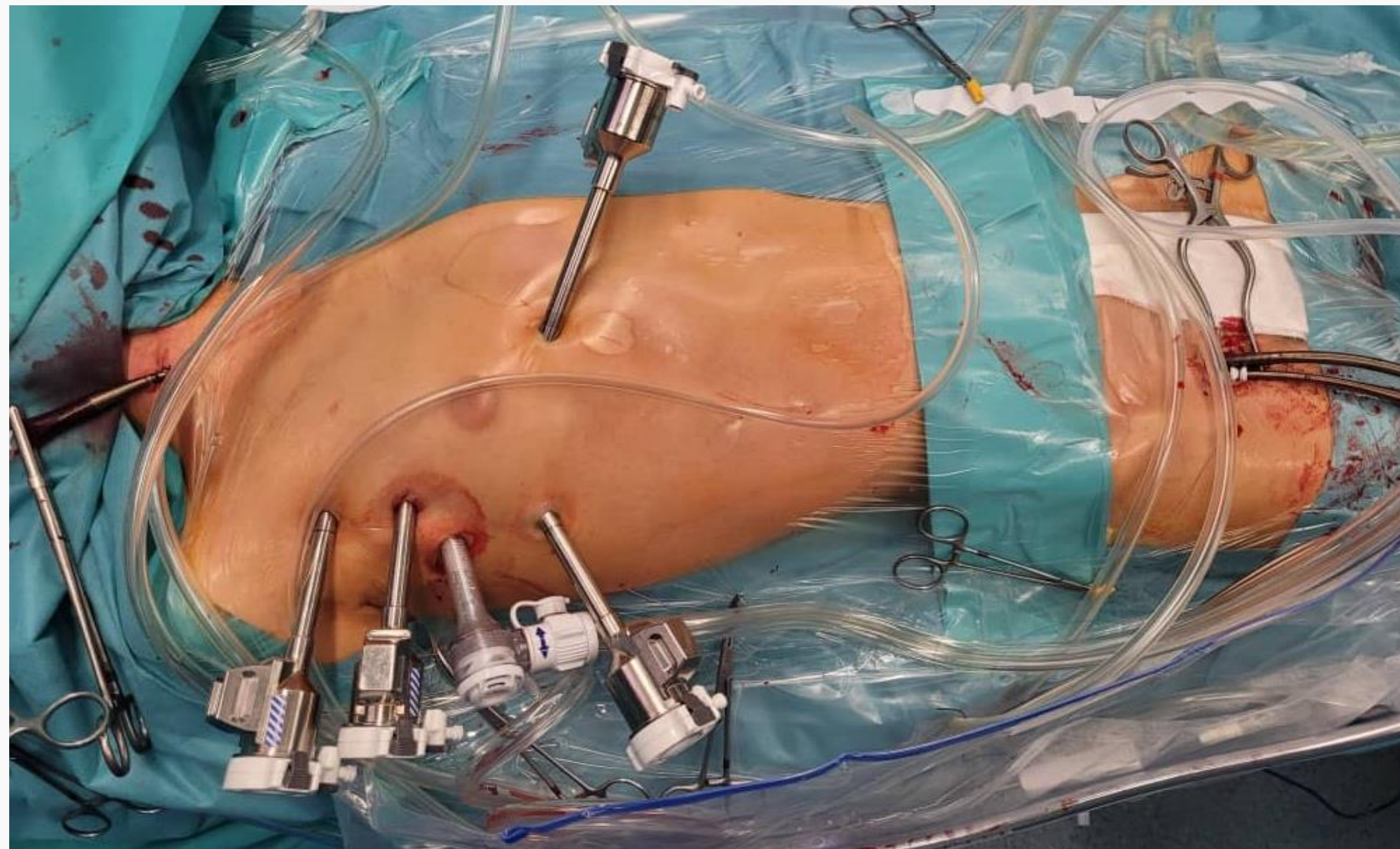


Robotic cardiac surgery has been gradually expanding. However, its application in the paediatric population remains anecdotal. We aim to present the initial results of our paediatric robotic cardiac program.

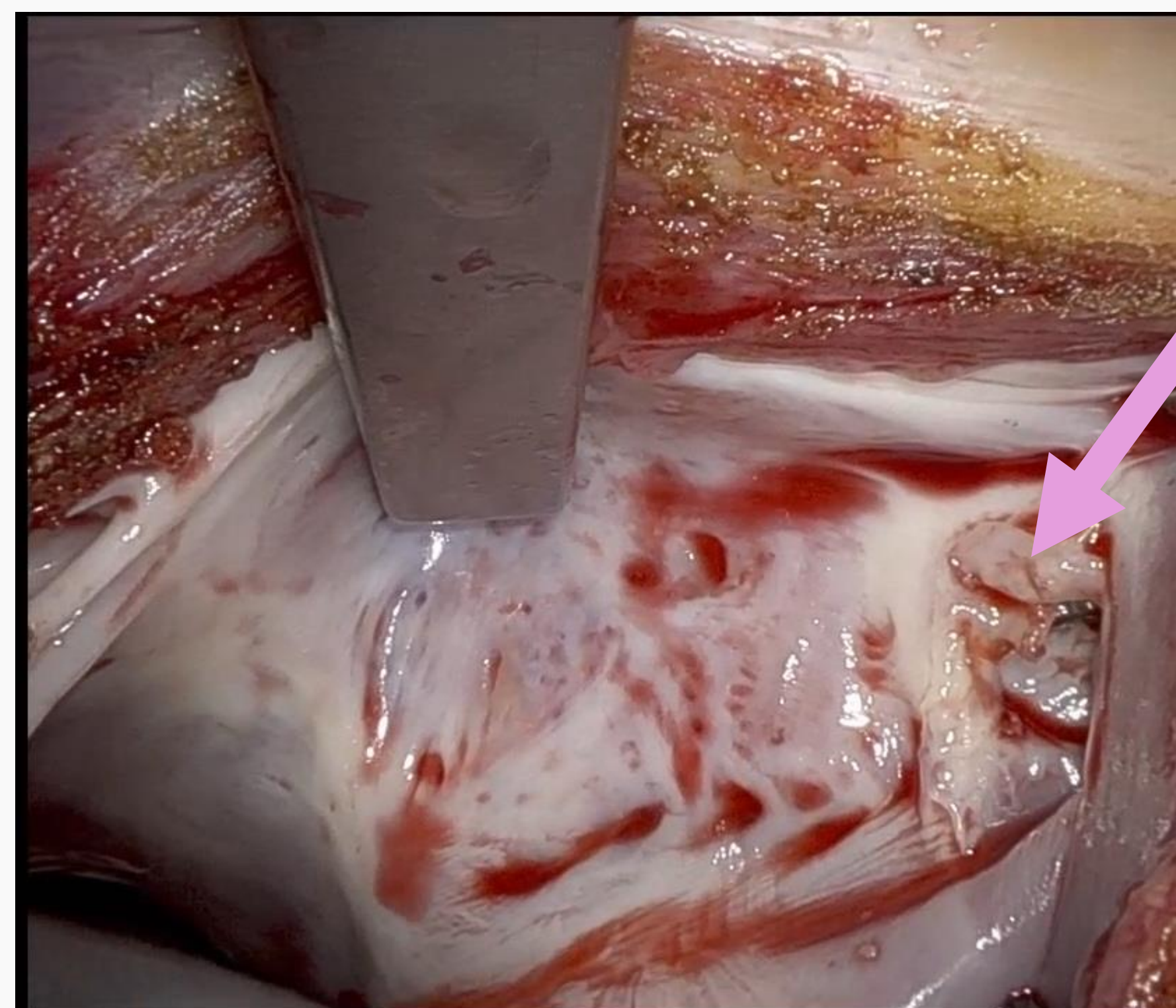
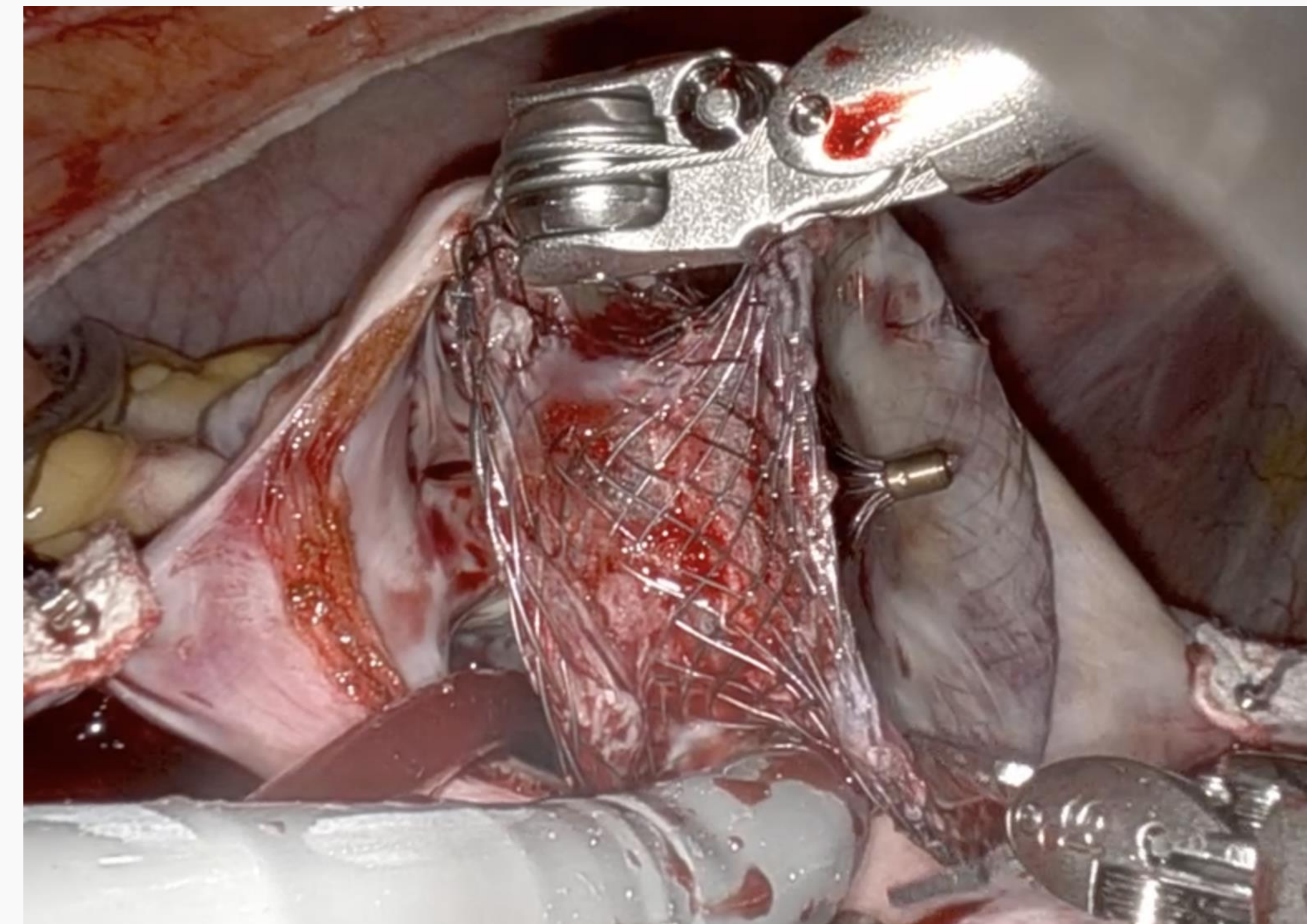
Review of the paediatric patients 9<18 years) operated with the robotic platform since the beginning of the robotic program (2019).



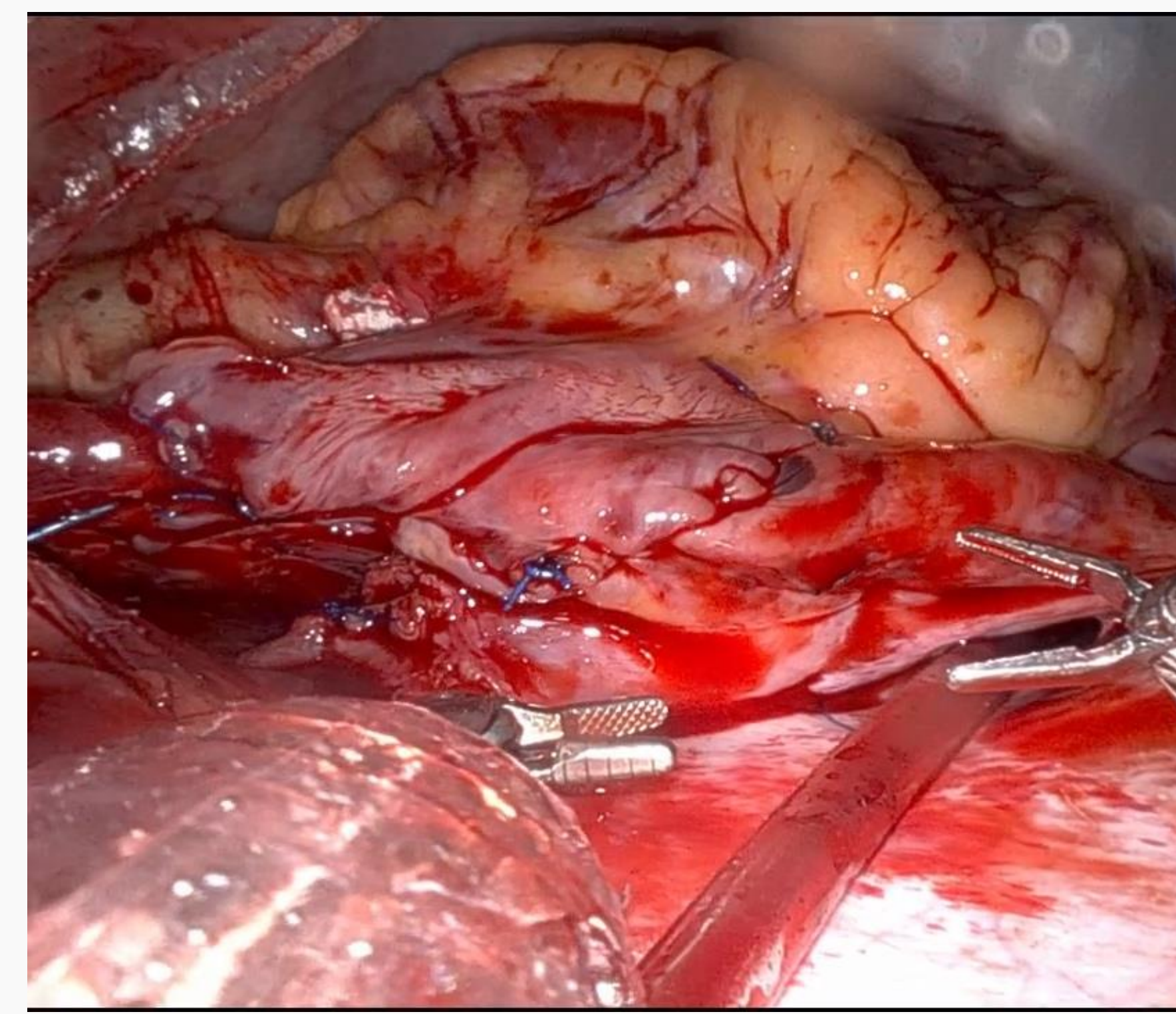
	7 patients
Gender	2 males/5 females
Age	14.3 years (9-15 years)
BSA	1.2 m ² (1.09-1.47)
Indication	- 1 Cor triatrium sinister - 2 OS ASD with previous percutaneous occlusion - 2 OS ASD - 1 ASD with mitral cleft - 1 PAPVR with ASD

OS: Ostium secundum; ASD: Atrial septal defect; PAPVR: Partial anomalous pulmonary return

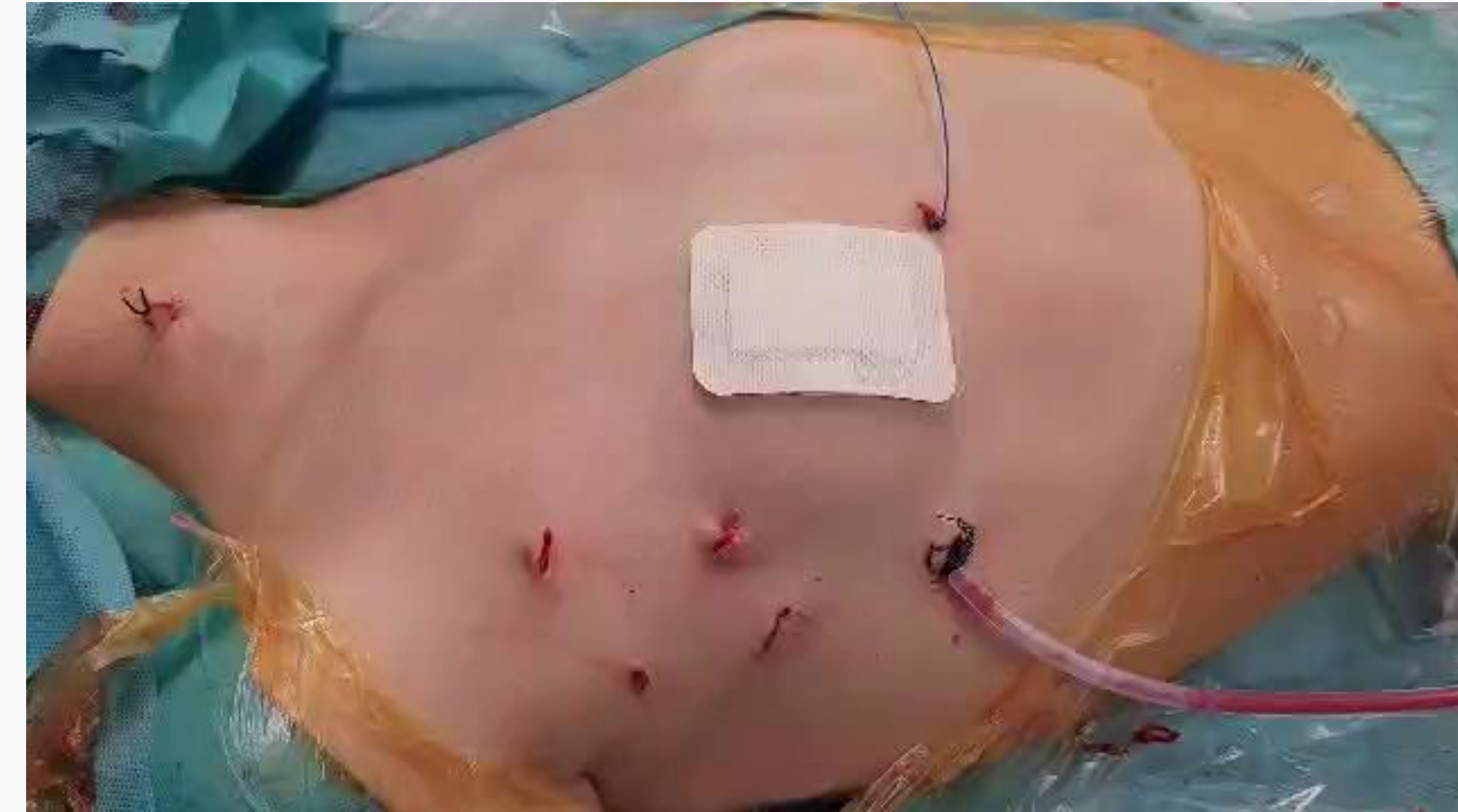
	7 patients
Cardiopulmonary bypass time (min)	78 (49-183)
Ischemic time (min)	39 (26-111)
Total surgical time (min)	196 (125-300)
Venous cannulation	21-23
Arterial Cannulation	13-15
Iugular cannulation (%)	6 (85.7%)
Extubation in the OR (%)	7 (100%)
Postoperative atrial fibrillation (%)	1 (14.3%)
ICU length of stay (days)	1 (1-5)
Hospital length of stay (days)	5 (3-21)



Cor triatrium sinister



PAPVR- Warden repair



Close-chest totally-thoracoscopic robotic cardiac surgery can be safely performed in the paediatric population and it can address different pathologies