

Same Day Emergency Care in Gynaecology: Hope or Hype?

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Introduction:

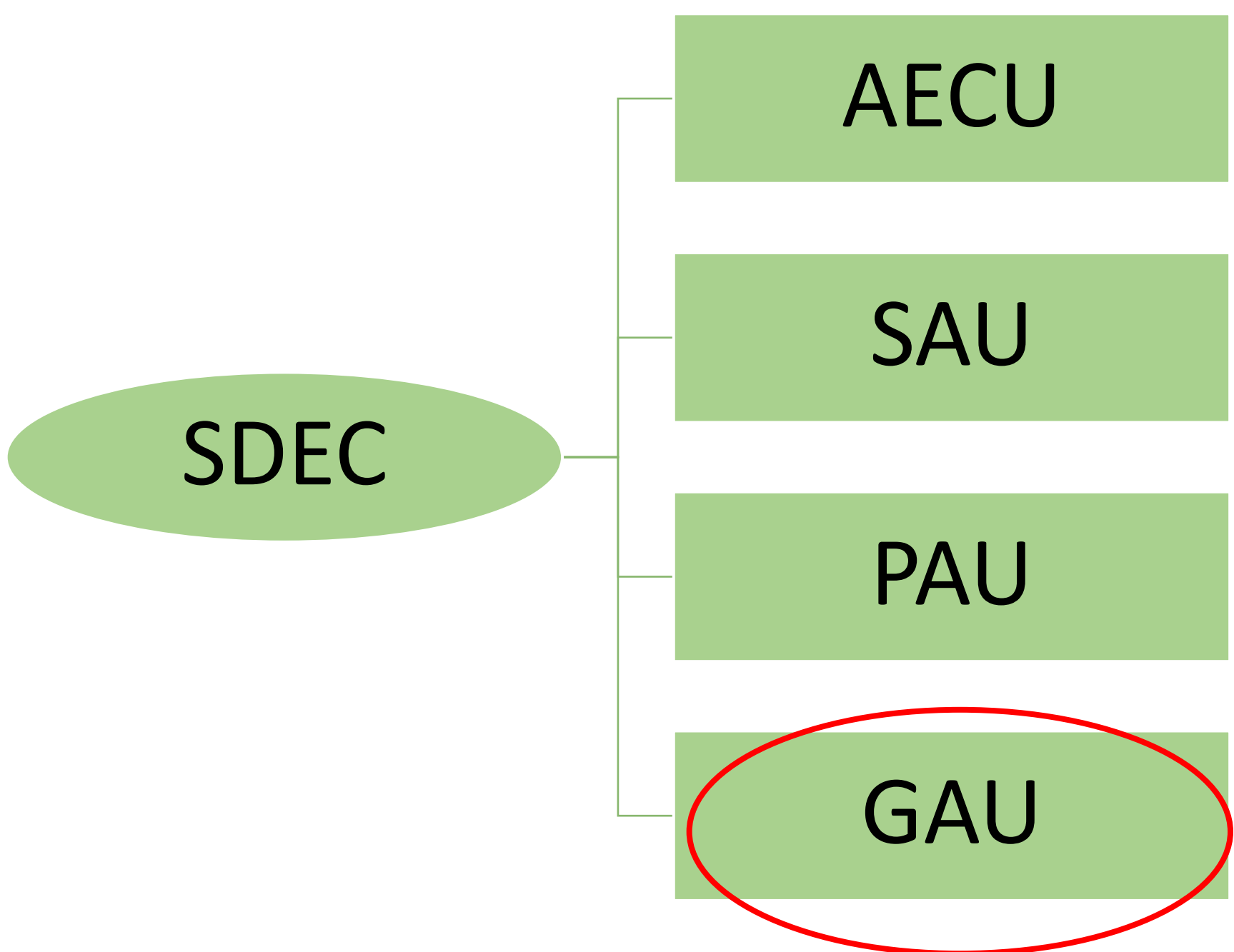
As of January 2022, **over 180,000** women in England are waiting over 18 weeks from referral to treatment in gynaecology

Increased to **610,000** in March 2022. This is now just over a **69%** increase since pre-pandemic levels.

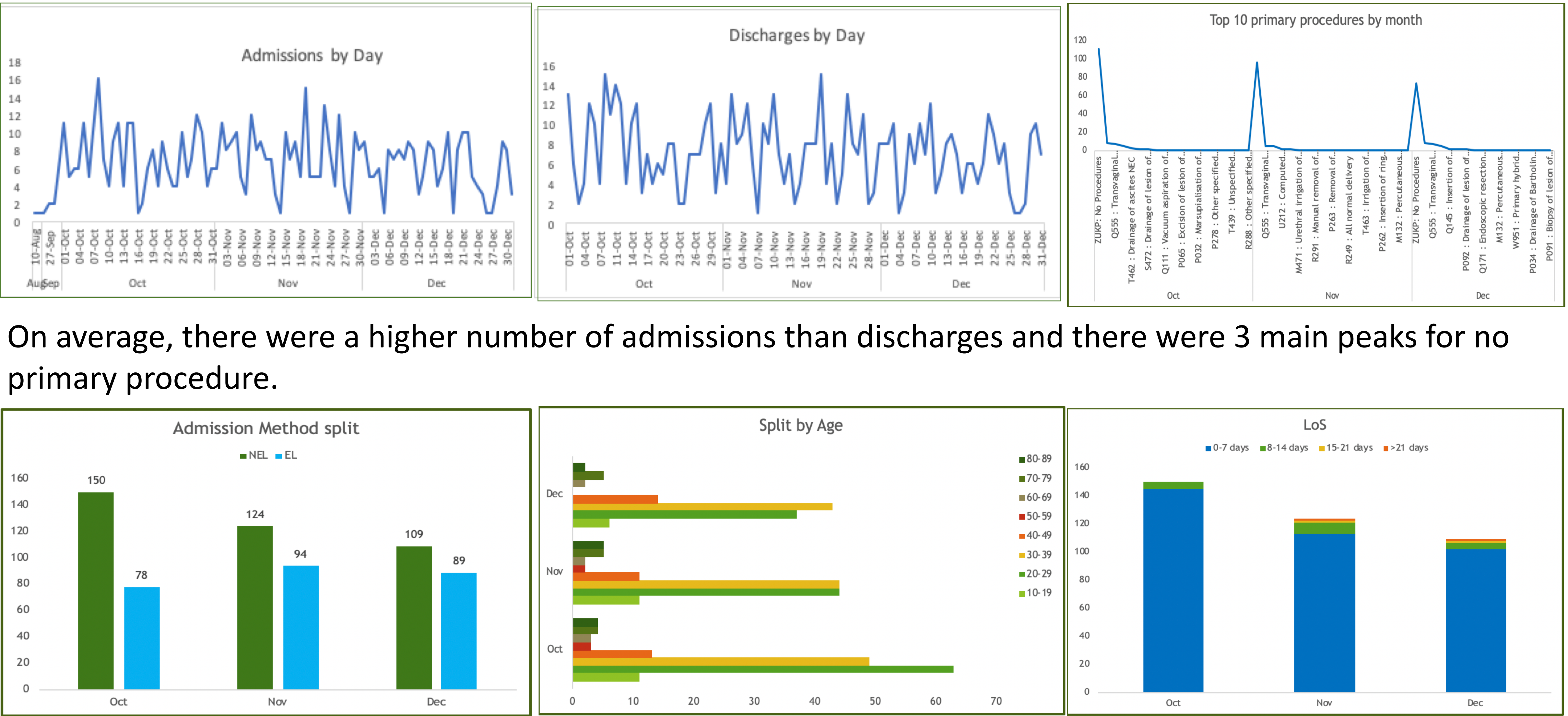
SDEC services have been introduced within other acute medical specialties at Russell's Hall Hospital

This model of service provision would be ideally placed to benefit gynaecological patients

Proposed Structure:



Results and Analysis:



On average, there were a higher number of admissions than discharges and there were 3 main peaks for no primary procedure.

There were a higher number of emergency admissions than elective admissions over the 3 month period, 2 main age range distributions: 20-39 and 40-49 yrs. Most patients had a length of stay between 0-7 days.

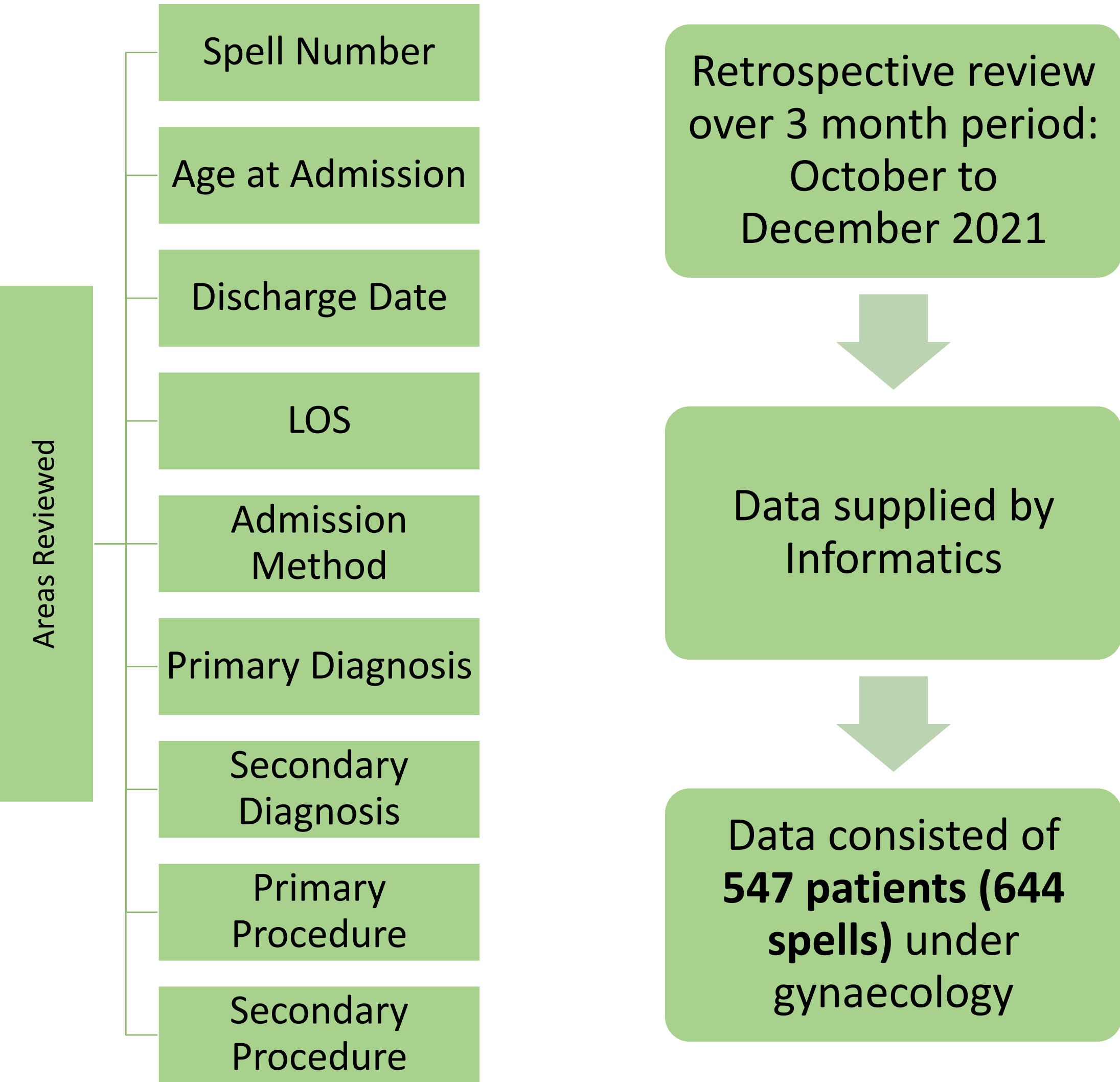
Benefits of SDEC:

Allows for patients to be assessed, diagnosed and start treatment on the same day, improving patient experience and reducing hospital admissions

Avoids unplanned and longer than necessary stays in hospitals, resulting in lower risk of infections and de-conditioning for patients

Financial benefits and cost savings for hospitals, and often for patients too

Methods:



Discussion:

Audit was presented at the Gynaecology Governance Meeting and received very positive feedback

Plan to launch a gynaecology assessment unit (GAU) in June/July 2023

Re-Audit 3 months worth data of admissions/discharge s post introduction of GAU

References:
<https://www.fhft.nhs.uk/gps/gp-centre/sdec-including-ambulatory-care/>
<https://rcog.shorthandstories.com/lefttoolong/index.html>