

ABSTRACT

This study investigated the prevalence of elective surgical procedure cancellations and identified the factors contributing to these cancellations at Institut Jantung Negara. Procedure cancel been proven to result in resource wastage and patient dissatisfaction due to financial burdens.

OBJECTIVES

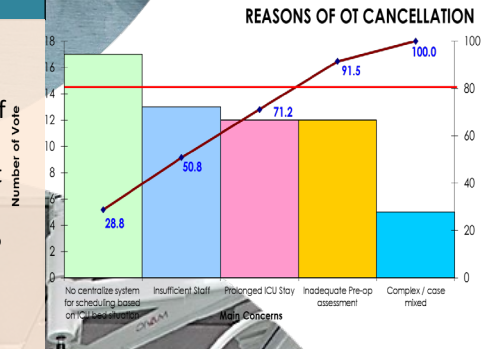
The primary goal was to reduce the prevalence of elective surgical procedure cancellations in adult cases from 8.6% to 5%.

METHODS

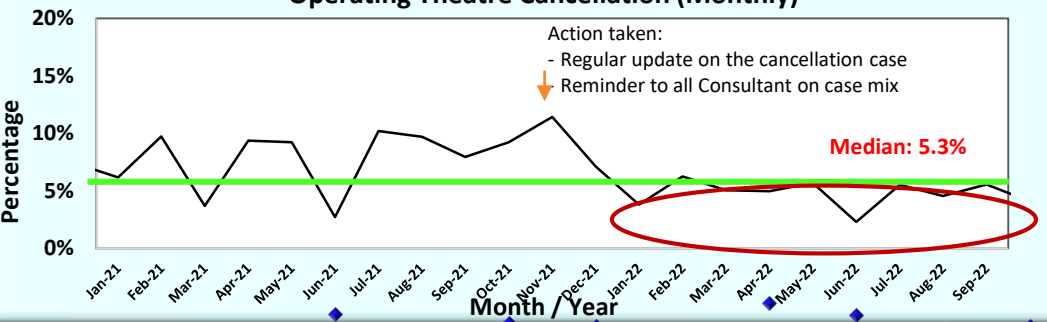
A quality improvement study was carried out on adult patients scheduled for elective surgery from May to November 2021 (pre-intervention) and December 2021 to July 2022 (post-intervention). Information on patients' demographics, diagnoses, intended procedures, operating theatre locations, cancellations, and causes for cancellations were gathered and analysed. The Plan-Do-Study-Act approach was applied to initiate a quality improvement project for adult cases from December 2021 to September 2022.

RESULTS

Pre-intervention, the percentage of elective surgical cancellations was 8.7% (n=129/1482). The primary cause for these cancellations was the unavailability of beds in the Intensive Care Unit (ICU), accounting for 50% of the cases. Additionally, patients deemed unfit for surgery accounted for 12%, while insufficient Operating Theatre (OT) time was responsible for 11% of the cancellations. Other factors contributing to cancellations included unclear financial status and scheduling changes.



Operating Theatre Cancellation (Monthly)



CONCLUSION

Post-intervention, the result of elective cancellations for adult cases decreased to 3.3%. No surgeries were cancelled due to the insufficient availability of ICU beds. Subsequent actions entail ongoing surveillance and auditing of cancellations caused by insufficient ICU beds and the intentions to expand the action plan to pediatric cases at Pediatric ICU.

REFERENCES

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