



HEALTH HOLDING

HAFER ALBATIN HEALTH
CLUSTER
MATERNITY AND
CHILDREN HOSPITAL

Department:	Provision of Care		
Document:	Multidisciplinary Policy and Procedure		
Title:	Day Surgery(Pediatric/Gynecology)		
Applies To:	Medical and Nursing Staff		
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1. PURPOSE:

1.1 To have a standard way regarding patient selection, admission and in-patient care for all patients for day surgery procedures at Gynaecology and Pediatric Surgery department in Maternity and Children Hospital Hafar Al Batin.

2. DEFINITIONS:

2.1 Day Surgery – the admission of selected patients to hospital for a planned surgical procedure, returning home on the same day. The day surgery patients require full operating theatre facilities and/ or general anesthesia, and any case not included as out- patient or major procedure.

3. POLICY:

3.1 When patients have procedures that qualify as "Day Surgery" performed when the Day Surgery Unit is closed or over capacity, they shall be cared for on an inpatient unit.

3.2 Pre-operative criteria shall be met for each patient before undergoing a surgical procedure.

3.3 Post-op/discharge criteria shall be met for each patient prior to discharge.

4. PROCEDURE:

4.1 Benefits:

4.1.1 Patient receive treatment that is suited to their needs which allows them to recover in their own house.

4.1.2 The risk of hospital acquired infection is reduced.

4.1.3 The cancellation rate is very unlikely.

4.1.4 Hospital beds are kept for the more major cases.
Operating Room waiting list are

4.2 Guidelines:

4.2.1 Patient Selection: Maternity and Children Hospital Hafar Al Batin Day Surgery List

PEDIATRIC SURGERY	GYNECOLOGY
• Baby Hernias	• D&C
• Hydrocele	• Termination of Pregnancy
• Undescended Testis (Palpable)	• Endometrial Ablation
• Circumcision	• Labial Procedures e.g. Bartholin's Cysts
• Some Soft Tissue Masses Excision	
• Some Skin Lesions	
• Some Rectal Surgery	• Laparoscopy for investigation, Sterilization and Excision of Ovarian Cysts
• Lymph Node Biopsy	
• Urethral Dilatation	

4.2.2 List of tissue sample not to send to histopathology:

- General Surgery – simple scar not associated with disease, finger and toe nails, foreign bodies with medical legal implications or history of cancer or infections, debridement specimens except when associated with disease, hernia sac, except in children under 5 years old.
- Teeth with attached soft tissue
- Normal foreskin
- Routine placentas

4.2.3 Pre-Operative Patient Assessment:

- 4.2.3.1 All patients should be assessed for their general medical status and fitness for Anesthesia. In the Anesthesia clinic before admission.
- 4.2.3.2 Proper information should be given to the patient to ensure that the patient understand the procedure, and the likely post-operative course.
- 4.2.3.3 The patient should be given appointment for surgery by the treating team.
- 4.2.3.4 Patient for day surgery should have all routine pre-operative preparations as any major cases, this includes: informed consent, blood donation and availability of Hbs Ag and HIV screening (for Ob-Gyne day Surgery).
- 4.2.3.5 All Patients for day surgery should be informed about the likely of admission s in patient for any un-wanted events that might happen during surgery or in the immediate post-operative period.

4.3 Admission:

- 4.3.1 Patient should arrive to the hospital at 0700H on the date of admission.
- 4.3.2 Patient are admitted immediately to their reserved beds in Gynecology Ward or Pediatric Surgery Ward.
- 4.3.3 Patient should be fasting for 6 hours before surgery.
- 4.3.4 Immediately after admission the patient will be reviewed by Ob-Gyne/ Pediatric Surgery resident who will assess Patient status and readiness for surgery

4.4 Discharge:

- 4.4.1 The patient once fully conscious and well enough will be discharge home.
- 4.4.2 The patient will give instructions regarding post-operative period, medication and when report to the hospital.
- 4.4.3 At any time during the surgical procedure or after if any un wanted event happened, patient can be admitted to Gynecology Ward or Pediatric Surgery Ward.
- 4.4.4 A copy of the discharge summary as well as medication should be given to the patient before discharge.

5. MATERIALS AND EQUIPMENT:

5.1 N/A

6. RESPONSIBILITIES:

- 6.1 All Ob-Gyne Physician
- 6.2 All Pediatric Surgery Physician
- 6.3 Nurse

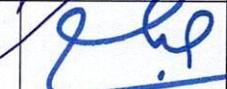
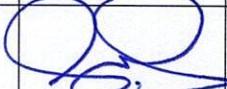
7. APPENDICES:

7.1 N/A

8. REFERENCES:

- 8.1 <https://www.saskatoonhealthregion.ca/about/NursingManual/1008.pdf>

9. APPROVALS:

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