# Pre-operative anaemia optimisation:

Service evaluation in a multidisciplinary adult pre-operative assessment clinic

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Hb range was 74 - 139g/L, with

average Hb lower in those awaiting

Majority of patients were treated with IV Iron:

non-major surgery.

No longer proceeding

## Background

Pre-operative anaemia is common and associated adverse surgical outcomes. Detection and management is a key pillar of patient blood management to prevent avoidable blood transfusions.

#### Method

Local pre-operative anaemia optimisation was evaluated in two phases:

- 1) Analysis of all referrals to pharmacist for pre-operative anaemia review over 3 months to evaluate management of pre-operative anaemia
- 2) Retrospective review of patients from colorectal, gynaecology orthopaedic theatre activity over 2 months to evaluate detection of pre-operative anaemia.

Anaemia defined as:

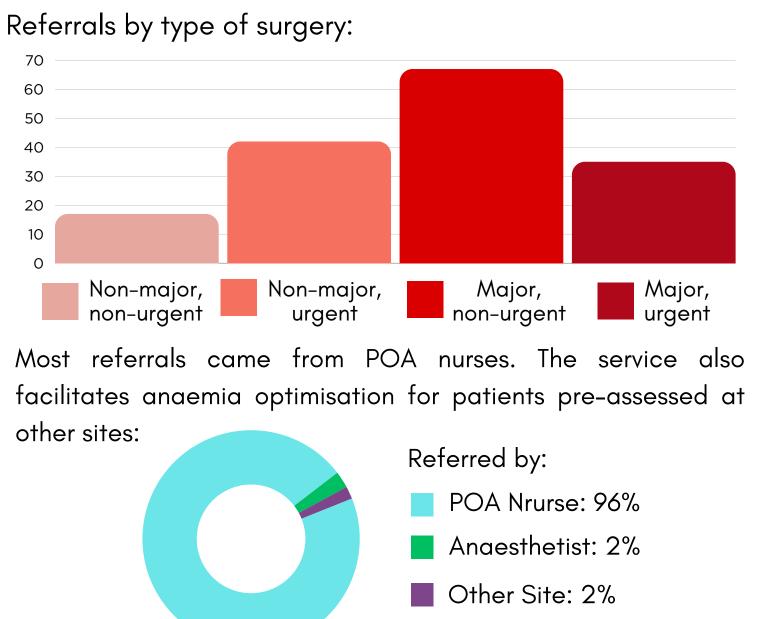
- Haemoglobin <130g/L for all male patients</li> & female patients awaiting major surgery
- Haemoglobin <115g/L for female patients</li> awaiting non-major surgery

#### Results

161 patients were referred for pre-op anaemia review (Sept-Nov 2023) out of total 1667 who attended for nurse pre-assessment:



Average of 54 referrals/month.



Average haemoglobin:

118g/L

50

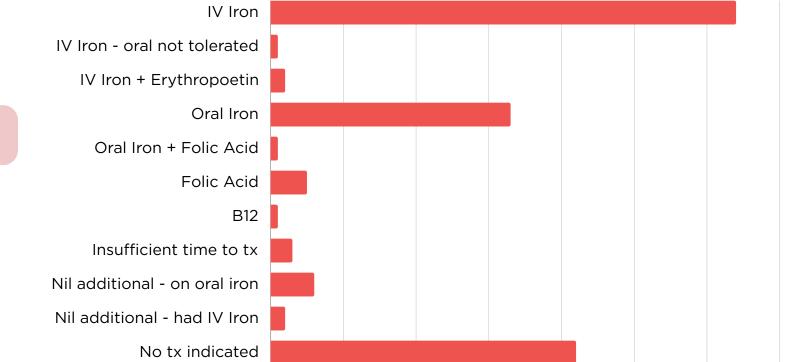
60

70

113g/L

116g/L

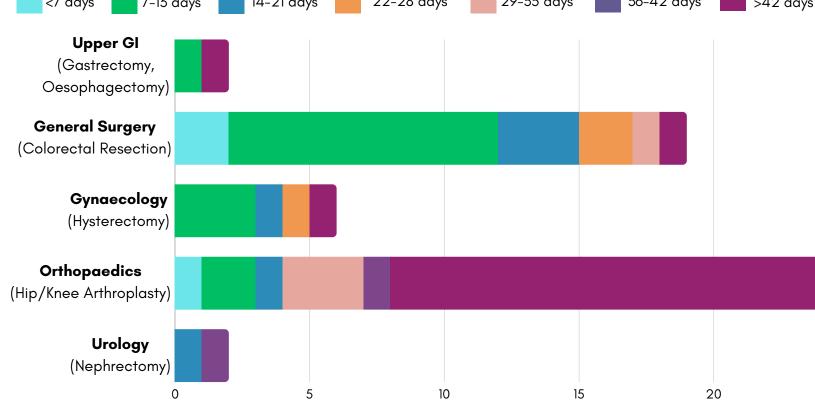
All referrals

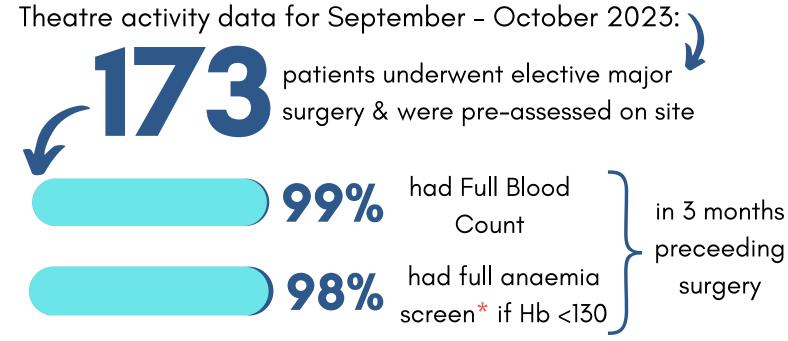


20

30







\*FBC, iron studies (serum ferritin, transferrin saturation), B12, folate, renal function (U&E and eGFR), CRP)

### **Future Work**

Efforts should continue to ensure all patients are screened for anaemia within 3 months of major surgery working with POA & surgical booking teams.

This baseline evaluation will inform future improvement work to identify and treat anaemia earlier in surgical pathways.



