

Patient Perceptions of Same-Day Discharge After Minimally Invasive Gynecologic and Pelvic Reconstructive Surgery

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Background/Synopsis

Few studies have assessed patient perception of same-day discharge after pelvic reconstructive or minimally invasive gynecologic surgery. Increased knowledge of patients' values allows for evidence-based, patient-centered perioperative care.

Objective/Purpose

To evaluate patient perceptions of same-day hospital discharge after minimally invasive gynecologic and pelvic reconstructive surgery.

Methods

A survey administered to new patients presenting to an ambulatory clinic.

Results

Two hundred and eight of 216 women approached completed the study (96.3%). The majority rated their health as good or very good (61.1%). Most rated their mental health as good or very good (64.9%). On average, patients had previously undergone 3-5 prior surgeries and 68.8% had been discharged home the same day, with 74.8% rating this experience favorably. 86.1% (n=179) reported feeling comfortable going home the same day as surgery. The most important cited reasons for going home included "sleeping in own bed" (73.4%) and "being with family" (61.8%). The most important cited reasons for staying overnight in the hospital included anticipated "better pain control" (58.9%) and "decreased overall complications" (43.0%). 51.7% reported expecting to stay 1 night (range 0-6) after surgery, while 35.7% expected to be discharged the same day. After reading a brief statement on the safety of same-day hospital discharge, 93.7% (n=193) reported they would feel comfortable going home the same day as surgery. Of the 29 women who reported at baseline they would not feel comfortable with same-day discharge, 19 (65.5%) reported they would feel comfortable after reading the statement. "If their surgeon recommended it", almost all participants, 96.1% (n=198) reported they would feel comfortable with same-day discharge.

Conclusion

Most patients perceive same-day hospital discharge favorably following minimally invasive gynecologic and pelvic reconstructive surgery. While a brief evidence-based statement on this practice further improves patient acceptance, direct surgeon counseling is likely most important to establish discharge goals.