



Contact Details

Nursing Team
6311/6312/6313/6314

SDEC Registrar 878
Mon-Fri 8am-5pm
outside these times
on-call Registrar **783**

Who is Surgical SDEC for?

The **Surgical Same Day Emergency Care (SDEC)** unit is for stable patients who require emergency surgical care that day or can be treated on an ambulatory basis without the need for admission.

When is it open? Monday to Sunday 07:30-20:00 (referrals accepted 8am-6pm)

Direct Admissions

*exclusion criteria applies

Patients can come straight to Surgical SDEC from triage. Please could staff just make a courtesy call to nursing staff to say a patient is coming.

- Post-operative problems
- Abscess on the trunk (not diabetic/immunocompromised/not IVDU)
- Known gallstones (awaiting treatment, consultant at BDGH) with flare of symptoms
- Limited PR bleeding

SDEC Referral after ED review

*exclusion criteria applies

In such cases the SDEC SpR should be contacted for referral and transfer. Out of hours these patients may be considered suitable for SDEC hot clinic. Results of bloods may not be necessary to be available but should be in process.

- RUQ pain/RIF pain/LIF pain
- Hernias without skin changes/peritonism or obstruction
- Equivocal abdominal pain in whom non-surgical causes (including gynaecological) have been reasonably excluded.

Exclusion Criteria

Some patients are not suitable for referral/admission via the surgical SDEC and these surgical patients should be referred to the On-call surgical SPR.

PATIENTS WITHOUT A SURGICAL PROBLEM SHOULD NOT BE SENT TO SDEC

e.g awaiting social, awaiting transport

Patients who are excluded are identified below

- NEWS 4+ /over 3 in one parameter
- Oxygen requirement
- Signs of sepsis/obstruction/perforation/peritonism/haemodynamic instability
- Pain not controlled with simple analgesia
- Diarrhoea and vomiting with no abdominal pain
- Known COVID contacts or positive/symptomatic of COVID
- GCS <15 or requirement for neurological observations
- Non-ambulatory patients (mobility issues, immobile or bed bound patients) (Long term wheelchair users – discussed on case by case basis)
- Large volume PR bleed
- Children (under 16)
- Pregnant females unless discussed first with Obstetrics Gynaecology on call and pregnancy issues have been excluded before transfer to SDEC.

This list is not exhaustive.

If you have any concerns or require advice, please contact SDEC SpR and discuss on a case by case basis regarding your referral.

Has the patient been seen in ED but is fit to go home and return to Surgical SDEC for review?

Please inform Surgical SDEC of patient details so they can prepare for their attendance. E-form booking imminent.

Options

- 1) Surgical Review following day – Patients you feel are well enough to go home that day but still require a surgical review. If potentially for theatre please inform the patient to attend fasted (e.g. abscess).
- 2) Hot Clinic 9-11:30 – Monday, Wednesday, Friday – Consultant led. (No Breast, Urology, ENT or Orthopaedic)

ENT and Orthopaedic patients

These need to be accepted by speciality, discussed with nursing team and meet the inclusion criteria before transfer to Surgical SDEC.

Does the patient need admitting from ED?

Please send straight to inpatient surgical bed.

(If there is bed pressure please discuss with Surgical SDEC on a case by case basis)

Please consider at the weekends there is no Doctor based on Surgical SDEC
(they have to cover the surgical wards and operate in theatres)