

**Freedom of Information Act 2000 – Request Reference FoI/24/100**  
**Robotic General Surgery**

If possible, I would like to make an FOI request to obtain the following information email for the time period of 2019-2022:

If you do not have a surgical robot please reply to this email with 'I do not have a robot' and there is will be no need to reply to the rest of the email.

- 1. The total numbers of Emergency general surgery operations performed between January 1st 2019-January 1st 2023. Broken down by: Open, laparoscopic and robotic**
  - Robotic Emergency's = 0
  - Laparoscopic Emergency's = 3563
  - Open Emergency's (Please note this number is all general surgery procedures where a laparoscopic approach has not been specified Excludes OPCS codes all Y75's) = 3548

Or

Open Emergency's (Please note that this number is all general surgery procedures where a laparotomy approach has been specified Excludes code Y50.2 ) = 1894

- 2. Type of robot available in your trust and used in emergency general surgery cases (Examples include Da Vinci, Versius, Freehand, Soloassist, Microhand S, AESOP, Zeus).**

Cardiff and Vale University Health Board's (the UHB's) General Surgery does not use robots for emergency cases.

- 3. Number of robotic general surgery cases performed between January 1st 2019-January 1st 2023. (this includes both emergency and non-emergency operations)**

- Robotic Elective & Emergency's = 95

- 4. Number the following performed between January 1st 2019-January 1st 2023. Broken down by: Open, laparoscopic and robotic**
  - 1. hot cholecystectomies**
  - 2. laparotomies**
  - 3. appendectomies**
  - 4. hernia repairs**
  - 5. abscess**
  - 6. scrotal explorations (which may be under torsions or orchidopexy)**

Regarding the abscess questions we are interested in all incision and drainages of abscesses in perianal, truncal, buttock and limb areas.

**Notes for the Count of Procedures:**

Patients may appear in more than one group:

e.g. Multiple Hernia procedures during same operation  
e.g. Cholecystectomy and Hernia Repair on the same day  
e.g. Laparotomy and Cholecystectomy on the same day

	LAPAROSCOPIC	OPEN	ROBOTIC
ABSCCESS	10	1,201	
APPENDECTOMIES	1,766	132	
CHOLECYSTECTOMIES	2,409	544	17
HERNIA REPAIRS	255	1,391	5
LAPAROTOMIES	7	2,589	
SCROTAL EXPLORATIONS		4	
<b>Total</b>	<b>4,447</b>	<b>5,861</b>	<b>22</b>

**6. Mean length of stay of patients who have undergone the following performed between January 1st 2019-January 1st 2023. Broken down by: Open, laparoscopic and robotic.**

1. hot cholecystectomies
2. laparotomies (how many times open abdomens are done)
3. appendectomies
4. hernia repairs
5. abscess
6. scrotal explorations (which may be under torsions or orchidopexy)

**Notes for the Average LOS:**

Length of stay is the Super Spell LOS i.e. includes any LOS if the patient is transferred to another hospital within Cardiff and Vale Health Board

Patient in multiple procedure groups e.g. Cholecystectomy and Hernia Repair on the same day will have the same LOS attributed to both procedures

The LOS for patients with multiple procedures in the same group will only be counted once e.g. two different hernia procedures in the same operation - the LOS is counted once

Avg LOS	LAPAROSCOPIC	OPEN	ROBOTIC
ABSCCESS	22.5	6.1	
APPENDECTOMIES	2.7	9.1	
CHOLECYSTECTOMIES	4.3	9.4	1.1
HERNIA REPAIRS	3.0	4.0	3.0
LAPAROTOMIES	12.0	19.9	
SCROTAL EXPLORATIONS		11.8	

**7. The number and type of complications that occurred in robotic emergency general surgery cases between January 1st 2019-January 1st 2023. Including but not limited to conversions to another type of surgery, device-related complications, injury to surrounding structures or tissue, serums, infection, leakage, hernias.**

0 robotic general surgery cases so no further information.

**8. Number of staff trained to assist with robotic cases.**

While the UHB's Short Stay Surgical Unit (SSSU) does not conduct emergency general surgery cases, in SSSU, Urology uses the Da Vinci Robot during weekdays (excluding nights and weekends) for Robotic Prostatectomy and Robotic Nephrectomy cases. There are ten members of staff trained to assist in such robotic surgeries.

In SSSU, Gynaecology uses the CMR Robot during weekdays for Robotic Total Abdominal Hysterectomy, Bilateral Salpingo Oophorectomy, Pelvic Lymph Node Dissection, and Sentinel Biopsy cases. There are five members of staff trained to assist for CMR robot cases.

In Main Theatre, the Colorectal and Upper GI teams use the CMR Robot during weekdays – there are no emergency or out-of-hours demands. There are eight qualified and three unqualified members of staff trained for robotic work.

**9. The average (Over 4 weeks) number of staff trained to assist n robotic surgery available out of hours (weekends/nights).**

From the considerations in point 8 above, robotic surgery is not conducted out of hours.

To elaborate, emergency general surgery would include robotic assisted operations in any of: Acute surgical diseases of the abdomen, mesenteric ischaemia, appendectomies, cholecystectomies, hernias, bowel obstruction, adhesiolysis, diverticular disease, diverticulitis, incarceration, perforation, peritonitis, and acute conditions of the gastrointestinal tract.