



Reducing the number of unnecessary post-op bloods in colorectal surgery inpatients

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Abstract

Background: Routine daily blood tests are frequently performed postoperatively, often without clear clinical indication, serving more as a surveillance tool than a necessity. Reducing unnecessary blood tests can improve patient experience and quality of care, minimise material use, and reduce environmental impact. This is increasingly important as healthcare moves forward with aims to reduce its carbon footprint and achieve carbon neutrality. Research has shown that reducing unnecessary blood tests does not adversely affect patient outcomes when done in a controlled and safe manner, guided by clinical judgement and established protocols.

Methodology: A protocol was introduced to prevent unnecessary blood testing in patients following elective colorectal surgery, whilst minimising risk to patients. The new protocol was implemented for elective colorectal inpatients, and data was gathered over four months.

Results: Data was compared to retrospective figures and revealed a significant decrease in the number of unnecessary blood tests performed. The protocol reduced the number of consumables needed and saved £12.85 per patient, per stay. The reduction in carbon emissions represented 969.2g CO₂e per patient per stay.

Conclusion: The successful implementation of this protocol led to a reduction in unnecessary blood tests in elective colorectal surgery patients. The changes were carried out safely and effectively, with no additional risk to patient care. The cost of postoperative blood tests was reduced to £7.96 per patient, representing a cost saving of £4.89 per patient per stay.

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