

Editorial

Mark Skues, Editor-in-Chief

This edition of the Journal has a couple of papers submitted by some of the leaders in the field of Ambulatory Surgery. While this should not detract from every valued contribution, it is pleasing that they should see fit to add their knowledge and insight to the evidence base contained in this Journal.

The first one, contributed to by two members of the Executive Committee of the International Association for Ambulatory Surgery, reviews staffing models in an Ambulatory Surgery Unit, and asks what is the optimum nurse to patient ratio? Consensus opinion suggested a ratio of three to four patients per nurse in Phase 2 Recovery, though it must be admitted that the data is somewhat weak.

The second paper is a review of the value of performance and quality indicators, written by two previous presidents of the IAAS. They helpfully break down the ambulatory pathway into pre-operative, peri-operative and post-operative phases, and describe the suggested key factors, compliance with which should aid overall performance.

The third paper reviews the status of robotic surgery across various Latin American countries. Whilst robotic surgery appears to be used more in inpatient surgery that ambulatory care, conversion of major surgical procedures to minimally invasive should result in faster recovery and subsequent discharge.

The final paper is a series of case reports describing the use of diluted intrathecal local anaesthetic agents for predominantly perineal surgery. The authors describe the dilution of the local anaesthetic and patient positioning, together with recovery times after surgery. Predictably, times to discharge were reduced from 310 minutes to approximately 130 minutes, with operating conditions deemed excellent in all patients by the surgeon.

In conclusion; enclosed are four papers covering a wide realm of ambulatory surgical principles and practice. The search for new submissions continues with the hope of another four papers to publish in December. Please consider contributing to keep the Journal productive.

Dr Mark Skues
Editor-in-Chief