

Executive Summary

Results from 2020–2021 – the Eighth Year of the National Emergency Laparotomy Audit

[Principal performance statistics are available here.](#)

1 **22,132** patients who had emergency bowel surgery in England and Wales were included in the Year 8 audit from **173** hospitals



2 Improvements in mortality have levelled off – **in-hospital mortality was 9.2%** compared to **9.1% in Year 7** and **9.6% in Year 6**



3 **86.8%** of patients received a preoperative assessment of risk (up from 85% last year, and 56% in Year 1)



4 **86.4%** of patients with a high documented risk had **consultant surgeon** input before surgery



71.5% of patients with a high documented risk had **consultant anaesthetist** input before surgery

5 Patients with **sepsis suspected at time of arrival in hospital** waited a median of **15.6 hours from time of admission** until surgery



6 **Median time to antibiotics in patients with suspected sepsis was 3.0 hours** from arrival in hospital

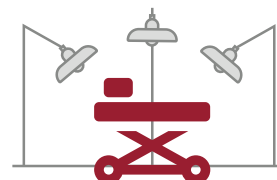


7 **91.8% of patients** received a preoperative CT scan (92.5% in Year 7)



26.3% of patients had their scan reporting outsourced (19.1% in Year 7 and 17.8% in Year 6)

8 Presence of both **anaesthetic and surgical consultants during surgery** in high-risk patients was **91.3%** (**90.2% in Year 7**)



9 **79.1% of high-risk patients** were admitted to critical care postoperatively (82.3% in Year 7); **15.7% of high-risk patients** were admitted to a normal ward



10 **55.3% of patients** were over the age of 65 and **17.7% of patients** were over the age of 80. **Only 31.8% of patients** 80 or over, or 65 and frail, had geriatrician input (26.8% in Year 7)

11 **Median length of stay** was highest for those with an **unplanned return to theatre** – 29 days – compared to 10 days for all patients



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