Selected Cardiac Surgical Patients Can be Managed Safely in General Recovery Units

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Background: As cardiac surgical patient population gets older and more complicated, intensive care unit (ICU) length of stay increases. As a result, ICU beds became a valuable resource. We evaluated the feasibility of managing cardiac surgical patients in the immediate post-operative period in the general recovery unit instead of ICU.
Methods and Results: between December 2010 and November 2011, 54 cardiac surgical patients were managed in the general recovery unit, at the immediate post-operative period, instead of been treated in the cardiovascular ICU. 47 patients (87%) underwent CABG, out of which 3 (5.5%) underwent OPCAB. Five patients (9.3%) underwent a valve operation or valve and CABG, and 2 patients (3.7%) underwent other cardiac operations. Mean age was 63.6 years and mean EUROSCORE was 5.21% .Mean post-operative length of stay was 5.1 days. One patient (1.8%) died after discharge. One patient (1.8%) had TIA, 1 patient (1.8%) had temporary post-operative renal impairment and 1 patient (1.8%) had post-operative sepsis. Twelve patients (22.2%) had post-operative atrial fibrillation. No other complications were observed. Forty four patients (81.5%) were transferred directly to the department's step-down care unit and did not require any ICU hospitalization.
Conclusions: managing cardiac surgical patients in the general recovery unit has no impact on survival or complication rate. In an Era of ICU resources shortage, selected cardiac surgical patients can be safely managed in general recovery units with excellent outcome.