

# GROUP AND SAVE FOR LAPAROSCOPIC CHOLECYSTECTOMY- IS IT REALLY NECESSARY?

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**Aims:** Routine group and save for patients undergoing elective or emergency laparoscopic cholecystectomy has become common practice, with no evidence backing this historical practice. We aim to assess the cost effectiveness of performing group and save for all patients undergoing cholecystectomy.

**Methods:** A retrospective study including all patients having laparoscopic cholecystectomy between January 2016 and December 2019 was conducted. 1916 patients were identified, and their electronic records were searched to investigate whether a group and save was obtained pre-operatively and if a transfusion peri or post operatively was required.

Number of  
cholecystectomies  
performed=  
1916

Male:Female  
469:1447

Average Age  
49

**Results:** Only 4 patients required transfusion during post-operative period. No deaths were recorded. The average cost of group and save at our local hospital is £17.24. We perform 500 cholecystectomies a year, and as two samples are normally required as per the hospital policy the final cost is £16,515.92 per year.

G+S taken: 98%  
(1877 patients)

G+S used: 0.2%  
(4 patients)

**Conclusion:** There is no current strong evidence that pose the need of requiring group and save prior to laparoscopic surgery. The prospect of blood transfusion attributable to laparoscopic cholecystectomy is exceedingly rare.

**Key statement:** Rather doing group and saves for every single patient, we can distinguish patients as per their needs and a directed method is suggested.