

One hospital night OK for robotic partial nephrectomy

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(HealthDay)—Regardless of surgical complexity, most patients undergoing robotic partial nephrectomy (RPN) can be discharged in one day, according to a study published in the February issue of *Urology*.

Following development of a [clinical pathway](#) targeting discharge on postoperative day one (POD 1) following RPN of any complexity, Ronney Abaza, M.D., and Ketul Shah, M.D., from The Ohio State University in Columbus, reviewed all 160 RPNs in 150 patients since institution of the pathway.

The researchers found that 35 of the patients had hilar tumors, 26 had segmental, and 33 had no artery clamping. Eight patients underwent multiple RPNs and three patients had solitary kidneys. The mean patient age was 57 years, mean [body mass index](#) was 32 kg/m², mean [tumor size](#) was 3.6 cm, and the radius, exophytic/endophytic, nearness to collecting system, anterior/posterior, and location (RENAL) nephrometry score was 8. The mean preoperative creatinine levels were 0.9 mg/dL and the discharge levels were 1.13 mg/dL. All patients ambulated on the day of surgery. Only one patient needed one dose of intravenous narcotic. Ninety-

seven percent of patients were discharged on POD 1, with the mean length of stay being 1.1 days. Only 2.7 percent of patients were readmitted within 30 days.

"Discharge on POD 1 is feasible in most patients after RPN, without increased complications, and may represent an advantage over [open surgery](#) if such a clinical pathway is applied," the authors write.

More information: [Abstract](#)
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