

## Unnecessary Pre-Op Blood Tests in Abscess Patients: A Closed-Loop Audit

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### Abstract

**Background and Objectives:** The NICE Guideline NG45 recommends against routine pre-operative blood tests for minor surgeries, such as excision of skin lesions and breast abscesses, in patients classified as ASA 1 or ASA 2. While primarily designed for elective minor/intermediate surgeries, the principles of avoiding unnecessary tests in these patients are broadly applicable. This audit aimed to assess adherence to these guidelines in abscess cases and evaluate the financial implications of unnecessary testing.

**Methods:** A closed-loop audit was conducted with data collection in two phases. The first phase, which occurred in March 2025, involved a retrospective review of patients presenting to the general surgery department. Data was collected on anaesthesia type, co-morbidities, and the rationale for blood tests. Following a combined governance meeting of surgery and anaesthesia teams, a change in practice was implemented, advising against routine blood tests in selected patients during triage. A second audit was carried out in September 2025 using the same data collection methods.

**Results:** The initial audit identified 28 cases of incision and drainage (I&D) procedures, all of which were performed on ASA 1 or ASA 2 patients, and 100% of these patients underwent pre-operative blood tests. Following the intervention, 53 I&D cases were recorded in the second audit, and blood tests were conducted 18 (33.6%) cases.

**Conclusion:** The implementation of staff education and revised guidelines resulted in a significant reduction in the percentage of patients undergoing pre-operative blood tests, from 100% to 33.6%. This intervention is projected to save the trust approximately £33000 annually and reduce the time and resources spent on unnecessary testing.

