



Our ref: **FOI 24-196**

## Your request

You requested the following:

I am a medical student currently working on a project on the theme of Emergency Robotic Surgery in General Surgery. If possible, I would like to make an FOI request to obtain the following information email for the time period of 2019-2022:

If you do not have a surgical robot please reply to this email with 'I do not have a robot' and there is will be no need to reply to the rest of the email.

1. The total numbers of Emergency general surgery operations performed between January 1st 2019-January 1st 2023. Broken down by: Open, laparoscopic and robotic
2. Type of robot available in your trust and used in emergency general surgery cases (Examples include Da Vinci, Versius, Freehand, Soloassist, Microhand S, AESOP, Zeus).
3. Number of robotic general surgery cases performed between January 1st 2019-January 1st 2023. (this includes both emergency and non-emergency operations)
4. Number the following performed between January 1st 2019-January 1st 2023. Broken down by: Open, laparoscopic and robotic
  - a) hot cholecystectomies
  - b) laparotomies
  - c) appendectomies
  - d) hernia repairs
  - e) abscess
  - f) scrotal explorations (which may be under torsions or orchidopexy)Regarding the abscess questions we are interested in all incision and drainages of abscesses in perianal, truncal, buttock and limb areas.
6. Mean length of stay of patients who have undergone the following performed between January 1st 2019-January 1st 2023. Broken down by: Open, laparoscopic and robotic.
  - a) hot cholecystectomies
  - b) laparotomies (how many times open abdomens are done)
  - c) appendectomies
  - d) hernia repairs
  - e) abscess
  - f) scrotal explorations (which may be under torsions or orchidopexy)
7. The number and type of complications that occurred in robotic emergency general surgery cases between January 1st 2019-January 1st 2023. Including but not limited to conversions to another type of surgery, device-related complications, injury to surrounding structures or tissue, serums, infection, leakage, hernias.
8. Number of staff trained to assist with robotic cases.

9. The average (Over 4 weeks) number of staff trained to assist n robotic surgery available out of hours (weekends/nights).

To elaborate emergency general surgery would include robotic assisted operations in any of: Acute surgical diseases of the abdomen, mesenteric ischaemia, appendectomies, cholecystectomies, hernias, bowel obstruction, adhesiolysis, diverticular disease, diverticulitis, incarceration, perforation, peritonitis, and acute conditions of the gastrointestinal tract.

### **Our Response**

I can confirm that the Health Board has completed a search of its records and can confirm we do not hold the information requested. This is because we do not have robot for the purposes of general surgery.