RELEVANCE OF UNIVERSAL KIT COMPOSITION AND ECONOMIC VALUE OF NON-USED MEDICAL DEVICES

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BACKGROUND AND IMPORTANCE

The Universal Kit (UKIT) is composed of sterile medical devices (MD) essentials for large surgical operations. The UKIT composition was established years ago to meet demands of different specialties’ surgeons. UKIT is annually purchased by public tender procedure from specialized companies. Recently, we have noticed an increasing annual consumption which impact hospital expenditures.

AIM AND OBJECTIVES

Evaluate relevance of UKIT qualitative and quantitative composition by listing and calculating economic losses of remaining non-used MD

METHODS AND MATERIALS

This is a one-month prospective observational study (from 05.31.2021 to 06.30.2021) in the Central Operating Theatre (COT). The operating program is equally allocated between some surgical specialties: Urology and neurosurgery, visceral surgery and gynecology, traumatology and thoracic surgery. Checklist of UKIT components is manually filled during surgery procedures. Non-used MD are listed and economic value is calculated based on Unit Prices (UP) of public tender procedure attributed in 2020. Data is analyzed by Excel.

RESULTS

The UKIT composition (UP=24.01€) consists of: two mounted scalpel blade 23 (UP=0.032€), twenty Gazin compresses (UP=3.78€), five abdominal compresses (UP=1.89€). Each surgical department use an average of 7 UKIT per week which corresponds to 371 UKIT per year. A total of 2226 UKIT (53446€) are used per year in COT. The economic losses are estimated per year: -For urology: at 293.09€ -For neurosurgery: at 293.09€ -For visceral surgery: at 81.99€ - For gynecology: at 81.99€ - For thoracic surgery: 222.60€ - For traumatology: 222.60€. The overall economic losses are estimated at 1195.36€ per year in COT, which represent 2.2% of the annual budget allocated to UKIT.

CONCLUSION

UKIT qualitative composition seems relevant despite the short study duration. The UKIT quantitative composition should be adjusted according to surgical specialties in order to optimize hospital expenditures. The re-sterilization of non-used MD could be an interesting alternative which should be examined and validated by the Committee of Medicines and MD.

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