

Media Briefing

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Clinical guideline on preoperative testing

The **National Institute for Clinical Excellence** (NICE) is part of the NHS. It is the independent organisation responsible for providing national guidance on treatments and care for those using the NHS in England and Wales. Its guidance is for healthcare professionals and patients and their carers, to help them make decisions about treatment and healthcare.

scientist, systematic reviewers and a health economist.

Although Guideline Development Groups seek the views of organisations representing healthcare professionals, patient and carers, manufacturers and government, their advice is independent.

What are clinical guidelines?

Clinical guidelines are recommendations on the appropriate treatment and care of patients with specific diseases and conditions within the NHS in England and Wales. They sit alongside, but do not replace, the knowledge and skills of experienced health professionals.

Organisations representing patients and carers, healthcare professionals and a number of NHS organisations are invited to become involved as stakeholders in the development of each individual piece of NICE guidance.

Who is involved in developing clinical guidelines?

NICE has established a number of National Collaborating Centres to harness the expertise of the Royal Medical Colleges and patient/carer organisations when developing clinical guidelines. Each Centre is a professionally led group with the experience and resources to develop guidance for the NHS on behalf of NICE.

The **National Collaborating Centre for Acute Care** was responsible for managing the development of the preoperative tests guideline. There were 48 registered stakeholders for this guideline, including:

- Association of Surgeons of Great Britain and Ireland
- British Medical Association
- National Association of Theatre Nurses
- NHS Modernisation Agency
- Department of Health
- Royal College of General Practitioners
- Royal College of Anaesthetists
- Royal College of Pathologists
- Royal College of Radiologists
- Royal College of Surgeons
- Society and College of Radiographers

The Collaborating Centre sets up a Guideline Development Group to develop individual guidelines. Each Group includes healthcare professionals, patients/carers, methodologists, an information

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How long does it take for NICE to develop a clinical guideline?

Clinical guidelines take about 2 years to develop. It is important to make sure that all the evidence on a topic has been considered, and this takes time. NICE believes that consultation with those who may be using the guidance is vital for the development of robust advice and we therefore need to give people a reasonable length of time to consider draft documents.

The development of the preoperative tests guideline began in October 2000 when NICE consulted on the scope of the guideline.

The guideline development group met for the first time in February 2001. NICE consulted on the first draft of the guideline in June 2002 and the second draft was published on the NICE website in September 2002 for 4 weeks consultation.

Do NHS organisations have to find funding to follow clinical guidelines?

Under clinical governance arrangements, NHS organisations in England and Wales have to take all NICE guidance into account.

Local health communities should review their existing service provision for people under-going elective surgery against this guideline as they begin the development of their Local Delivery Plans. The review should consider the resources required to implement fully the recommendations

set out in the guideline, the people and processes involved, and the timeline over which full implementation is envisaged. Clearly, it is in the interests of patients that the implementation timeline, as determined by each local health community, is as rapid as possible.

Do health professionals have to follow NICE's decision?

Once NICE guidance is published, health professionals are expected to take it fully into account when exercising their clinical judgement. However, NICE guidance does not override the individual responsibility of health professionals to make decisions appropriate to the circumstances of the individual patient, in consultation with the patient and/or their guardian or carer.

What does the preoperative tests guideline cover?

All NICE guidelines are developed in accordance with a scope document that defines what the guideline will and will not cover.

This guideline makes recommendations about the appropriateness of carrying out the following preoperative tests:

- Plain chest X-ray (radiograph)
- Resting electrocardiogram (ECG)
- Full blood count (to test for anaemia)
- Haemostasis (to test how well the blood clots)
- Renal function
- Random blood glucose (to test for diabetes)

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- Urine analysis (to test for urinary infections or kidney problems)
- Blood gases (to test for cardiovascular or lung problems)
- Lung function
- Pregnancy
- Sickle cell anaemia

The appropriateness of testing depends on the characteristics of patients, for example their age, other illnesses they may have and the type of surgery that is planned. Therefore the recommendations are set out in 'look-up' tables, cross-referenced by the type of surgery, common chronic illnesses and age.

The guideline is accompanied by an information leaflet for the public which clearly explains what the tests are for and what to do if they want more information.

discomfort to patients because of 'false positive' test results. The NICE guideline will ensure that no matter where people live in England and Wales, they can be confident that the health professionals caring for them have clear recommendations about the tests that should and should not be carried out.

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What are the implications of this guideline for the NHS?

Every year around 5 million* elective surgical procedures are performed by the NHS in England. For many years it has been usual practice in many hospitals to test patients preoperatively for unsuspected conditions that might affect their treatment. However, the number and type of tests that are given before surgery vary considerably across the country. Carrying out lots of preoperative tests is seen by some as 'erring on the safe side' but can lead to unnecessary delays or cancellation of operations as well as inconvenience and

* HES Data 2001