

# VetPartners Optimising Surgical Outcomes Report



## Welcome to the VetPartners Optimising Surgical Outcomes Report

The VetPartners Clinical Board are delighted to present some of our Quality Improvement (QI) work around optimising surgical outcomes. This has been a key area of focus for us and is of great importance to our patients, clinical teams, and clients.

We are proud of the fantastic job our teams are already doing in practice to achieve positive surgical outcomes and protect patient safety. By measuring this we can celebrate and perpetuate positive outcomes, but also identify areas for possible intervention. Harnessing QI in this way enables us to get better at making patients better, for the benefit of all! By sharing our successes at a team level, we can assist our colleagues across our business and identify possible points of intervention for the wider profession.

We know that concentrating on appropriate analgesia can reduce wound interference, as well as bringing other benefits such as reductions in the volume of isoflurane used. Further, reducing wound infections alters the amount of antibiotics and other medicines we need to prescribe. Antibiotic resistance is one of the biggest threats to the health of humans and animals worldwide. We all have a responsibility to practice good antimicrobial stewardship, safeguard patient safety and protect our clinical outcomes.

Overall, our data have shown that more than 93% of neuter patients had no or only minor problems post-operatively in 2024, compared to 92.1% in 2021. We know that optimising surgical outcomes is hugely important to our teams, and we also know that the people who can actually impact care are the people in our practices. This is the QI cycle in action and a team effort on a huge scale. Well done to all involved!

This report highlights key aspects of our ongoing work, as well as sharing links to existing and new resources that we have created for our teams. I hope you enjoy reading this report and I would encourage you to get in touch and tell us what you think of it and share ideas about other areas you would like us to focus on moving forwards together.

Please contact us by emailing [clinical.board@vetpartners.co.uk](mailto:clinical.board@vetpartners.co.uk).



Thank you for your help,

*Rach*

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Director of Clinical Research and Excellence in Practice, VetPartners  
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## Celebrating successes!

Across VetPartners, our clinical teams are already doing a great job of optimising outcomes for all their patients. However, to continue to progress care, we need to understand what is working well and do more of this, as well as understand more about what complications are occurring (if any) and how rare they are. This allows us to utilise Quality Improvement (QI) cycles with the consistent aim of getting even better results for our patients, teams and clients. Thanks to our amazing teams we now have data on over 27,000 surgeries.

## Post op codes

A post op code is a specific no cost code assigned to the patient within the Practice Management System (PMS) which, for example, describes the state of a surgical site. These codes are added by a member of the clinical team at various points when an animal is examined after a surgical procedure. We have audited our post op codes for routine neutering (speys and castrates) from 2021 to 2024 to see how many cat, dog and rabbit surgeries we did to look at outcomes.

2021 (55 practices)				
Species	Number of coded neuters	No problems or minor problems	Mild red plus discharge/seroma	Infection or wound breakdown
Cat 	6353	92.8%	5.3%	1.8%
Dog 	7956	91.8%	5.7%	2.6%
Rabbit 	791	93.2%	4.8%	1.9%
2022 (56 practices)				
Species	Number of coded neuters	No problems or minor problems	Mild red plus discharge/seroma	Infection or wound breakdown
Cat 	5781	94.5%	4.4%	1.2%
Dog 	8051	91.8%	6.3%	2.0%
Rabbit 	497	94.5%	4.0%	1.6%
2023 (64 practices)				
Species	Number of coded neuters	No problems or minor problems	Mild red plus discharge/seroma	Infection or wound breakdown
Cat 	8776	93.7%	4.3%	1.9%
Dog 	6915	90.8%	6.8%	2.4%
Rabbit 	327	94.4%	5.4%	1.2%
2024 (68 practices)				
Species	Number of coded neuters	No problems or minor problems	Mild red plus discharge/seroma	Infection or wound breakdown
Cat 	7423	93.8%	4.8%	1.5%
Dog 	7299	91.8%	6.3%	1.9%
Rabbit 	386	96.2%	2.7%	1.1%





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These data are remarkably consistent, which is great! It gives us confidence in the validity of our measurements. **More than 93% of patients had no or only minor problems in 2024, compared to 92.1% in 2021.** This is fantastic and demonstrates a QI cycle in action!

Another great finding was that more practices have started using post-op coding within their day-to-day care. In fact, the **proportion of procedures coded in 2024 has increased by 29%**! This is important, as by being able to measure outcomes, we can work towards improving them together.

The optimisation of surgical outcomes is a primary focus for our teams, and we know that key changes happen at a practice level. It is the practice meetings, informal chats about new ideas, ongoing learning, and implementation of new techniques or medications that make the REAL difference to our patients. This is a team effort on a huge scale. Congratulations to all involved!



“QI coding builds upon the client-practice relationship and highlights the importance of effective communication with clients; especially during surgical discharge appointments. When used as a tool for clinical auditing it supports the surgical preparation and theatre protocols that we have in place in practice and shows that the nursing team are providing the highest standard of patient care.”

**Amie Rawling, RVN, Aireworth Vets**

Being part of a proactive and engaged team striving for progress is a great reason to make QI an integral part of your practice. If you want to see how your practice is doing and you already use codes, give auditing a go! Many teams really like seeing their own data, especially if you can see trends towards improvement.



## Tips to increase the uptake of practice post-op coding:

- Try running a practice meeting about optimising surgical outcomes.
- Chat about how post-op codes can help us by:
  - Letting us measure how good we are now.
  - Letting us look at whether the implementation of a new idea leads to an improvement - and by how much.
- Discuss barriers to coding, and how to overcome them in your practice.
- Increase interest in Quality Improvement (QI) overall.
  - There are many potential projects e.g. antibiotic usage, post-op temperatures, isoflurane usage.
  - QI can be anything relating to the ways in which we work on improving our care.
- Encourage your teams to include some of the above information in conversations with clients - where teams have done this, we have had some really good feedback.



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## Ways to get started with QI in practice:

- Have a practice meeting.
- Discuss how the team presently feel about post-op outcomes and how you can measure this using codes.
- Discuss ideas that might lead to improvement – e.g. using local anaesthesia blocks before or improving body temperature monitoring.
- If there is a decision not to change anything this is also OK!
- Gather your baseline data from your PMS (get in touch if you need support with this at [clinical.board@vetpartners.co.uk](mailto:clinical.board@vetpartners.co.uk) or talk to your BDD)
- Plan any changes with the whole team and enable everyone to act on it, then record and reflect on this
- Re-audit after six months and share the data with your team.
- Chat again about further ways to improve or maintain our outcomes.

Access our support material on Quality Improvement (QI) here:  
<https://vetpartnershfhub.5app.com/playlists/193121>



## Optimisation of analgesia

One of the consistent ways that teams are trying to improve their surgical outcomes is by optimising the analgesia (pain relief) used for neutering procedures. The intention is that dogs and cats who are less painful will interfere with their wound less and thus reduce their risk of post-operative complication.

From choices around pre-medication, to the post-op analgesia at home, every step is worth a clinical conversation about whether there is an opportunity for improvement.



## Local anaesthetics

Our resource '**Local Anaesthesia for Neutering Procedures**' contains helpful photos and descriptions of how to perform intra-testicular blocks, incisional blocks, and intraperitoneal blocks in dogs and cats and can be accessed [here](#).

A complementary resource '**Local Anaesthetic Calculations for Dogs and Cats**' can be accessed [here](#). This comprises tables of the maximum recommended doses of lidocaine and bupivacaine which would be considered safe to use in dogs and cats. We recommend putting these tables up in your prep-room to help support local anaesthetic use.



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## Auditing the use of intratesticular lidocaine blocks in canine castration

One of our practices, Ash Tree vets, has examined the effects of intratesticular lidocaine blocks and whether they can reduce isoflurane use during dog castrations. Intratesticular lidocaine **reduced mean isoflurane use by nearly 25% during routine surgical castration** – this is AWESOME! We can help our patients, their pain, and the planet! Nicole Dyer of Ash Tree Vets presented these results at BSAVA congress to the wider profession. Find out more [here](#).



**Local anaesthesia for neutering**



**Local anaesthetic calculations**



**BSAVA conference proceedings**

## Pain scoring

Our teams have been utilising pain scoring systems to quantify patients' pain levels, their response to analgesia and their progress in relation to pain management plans.



'Pain scoring plays an integral part in our systems to constantly try and improve our pain management in surgical patients. We use it as part of a constant QI cycle to monitor and improve surgical outcomes by maximising the provision of analgesia. It enables us to quantify the level of discomfort experienced and therefore allows us to be sure that changes we make translate into actual improved outcomes. It also provides a safety net to prevent animals experiencing pain from being overlooked, as their behaviour may in part be masking significant discomfort. The overall impact of pain scoring has collectively helped us recognise and deal with pain better and earlier.'

**Luke Cottis, MRCVS, Hampden Veterinary Hospital**

## Practising good antibiotic stewardship

The optimisation of surgical outcomes goes hand in hand with practising good antimicrobial stewardship. Neuters are all clean surgical procedures, and most are completed in under 90 minutes. Therefore, prophylactic antibiotics are not required. The use of unnecessary antibiotics rapidly selects for resistant strains of nosocomial bacteria, increasing the risk of multidrug resistant bacteria being selected for.

Several Clinical Board resources exist to support our teams on this topic and encourage discussion around appropriate antibiotic use:



**Antibiotic course**



**Antibiotic Stewardship Report 2024**



**Avoiding antibiotics for routine neuters**



**Perioperative antibiotics for GI surgery**



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## VetPartners Antibiotic Stewardship Report 2024

At the end of last year we released our Antibiotic Stewardship Report for 2024. We were thrilled to share that since 2021 we have seen a 44% reduction in the amount of antibiotics purchased per full-time equivalent vet! This highlights our team-wide effort in promoting the responsible use of antibiotics while still protecting our great clinical outcomes. You can access this resource [here](#).

## Avoiding antibiotic use in routine neutering

This resource is based on data from our antibiotic usage survey, indicated that the vast majority of vets do not use antibiotics for routine neutering, with just 1.6% of vets using antibiotics always or often, with all other respondents using them rarely or never. You can access this resource [here](#).

## Perioperative antibiotics for gastrointestinal (GI) surgery in cats and dogs

Our resource, 'Perioperative Antibiotics for GI Surgery in Cats and Dogs', contains data from our antibiotic usage survey indicating how our teams currently use antibiotics in uncomplicated enterotomies and enterectomies. Findings suggest that, as a group, we are already making many good choices when we use antibiotics for patients undergoing GI surgical procedures. Although evidence relating to specific drugs, dosages and duration of treatment is limited, these data can help guide our choices in this area - particularly when we should be limiting or extending courses of appropriate antibiotics given during the postoperative period. You can access this resource [here](#).

The risk of post-operative infections can be reduced via good aseptic technique, prevention of self-trauma, regular pain scoring, using wound coverings or buster collars and local blocks where appropriate. Preventing surgical site infections is good news for the patient, client, and us. But it also prevents us from contributing to antibiotic resistance, which is one of the biggest threats to the health of humans and animals worldwide.



### Other resources to help optimise surgical outcomes (access these on VetPartners Learning):

- Where to look for evidence
- Veterinary evidence summaries
- Reducing the environmental impact of anaesthesia
- Brachycephalic pre-oxygenation poster
- Drugs to help fearful dogs in practice
- Decision making guide for castrating male dogs
- Drugs to help fearful cats in practice
- Promoting stress-free feline visits
- Feline medication masterclass
- Post-operative mental wellbeing



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## PROJECT DRAPES

Our Sustainability and Clinical Board teams are collaborating on a unique study called Project DRAPES (Drapes in Routine Aseptic Procedures for Environmental Sustainability).

This project was the idea of Ash Tree Vets' Lead Veterinary Surgeon, Nicole Dyer (who is also part of the Small Animal Clinical Board) and the Head of Environmental, Social and Governance, Hannah James, who wanted to know whether using disposable drapes in routine surgeries gives different patient outcomes compared with using washable, reusable drapes, which have less lifetime environmental impact.

As well as approval from the RCVS Ethical Review Panel, this project has won part-funding from the BSAVA PetSavers fund. We have now recruited 17 branches of 11 veterinary practices to this study and have data on 1313 procedures. Surgical patients are randomly assigned reusable or disposable drapes, and the full study protocol can be found [here](#).

At the end of the project, we will be able to say whether drape choice affects patient outcomes. If reusable textile drapes prove to perform the same as, or better than, single-use ones, practice teams will be able to choose reusable drapes with confidence, reducing waste and environmental impact without compromising patient care.

'Project DRAPES aims to answer questions surrounding sustainability choices in the operating theatre. The information we hope to gain will also help support improving surgical outcomes by providing data on factors that may influence the chance of surgical site infections and we are really excited for when we will be able to share the results with our teams.'

**Nicole Dyer MRCVS, Ash Tree Vets**



### Next steps...

Moving forwards, we are going to:

- Expand the use of post-operative codes to more practices and for more procedures.
- Work with our practices to identify areas where clinical discussion and audit has progressed their practice, so we can share it with the wider team.
- Publish and share our work with the wider veterinary profession and pet owning community, so we can share our knowledge and create new partnerships to help more professionals, owners and pets.
- Examine the use of antibiotics in other procedures and look for ways to progress our responsible use of medicines.
- Focus more on the pain management of surgical patients to optimise outcomes.
- Discuss the wellbeing of hospitalised patients and the challenges they face during their stay, to maximise their welfare at our practices and once they go home.
- Keep talking with our teams in practices!

If you would like help with carrying out an audit in your own practice, or to discuss any aspects of this work, please contact us at: [clinical.board@vetpartners.co.uk](mailto:clinical.board@vetpartners.co.uk)





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## Thank You!

As part of our optimising surgical outcomes activities, we are pleased to be collaborating with other groups across the veterinary profession and beyond to share our work and the work of others.

Whether you are part of the VetPartners team or not, if you are working in this area, interested in our data or are looking for partners passionate about this subject, please get in touch using the contact details shown below.

We are extremely grateful to all those involved in the production of this report and we are proud to have such incredible people working within VetPartners.

We couldn't achieve all that we do without you - thank you all!



**My VetPartners  
Clinical Board**

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