



Hospitals Information System

Gozo General Hospital
Gozo General Hospital

Hospital Activity Report 2005
Hospital Activity Report 2005

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Comments

The accuracy of information contained in this document might be limited by factors beyond the author's control.

Some data in this document may be subject to interpretation.

Users should always acknowledge the source in all works based on information supplied in this document.

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Introduction

This report provides information on hospital activity at Gozo General Hospital for the period from 1st January, 2005 to 31st December, 2005. It is based on data held in the Hospital Information System (NHIS) of the Department of Health Information (DHI). The data in the System is collected from both the Hospital Administration and from the hospital wards where a Hospital Activity form is filled for every in-patient and day case, on discharge from hospital. These forms are then processed, validated and analysed at DHI.

Detailed tables present data for hospital characteristics where the patients were treated, selected demographic characteristics of discharged patients, conditions diagnosed, and surgical and nonsurgical procedures performed. Text tables show information on special topics including trends, the elderly, and hospital deaths.

Types of measurements shown are frequencies, rates, and percent distributions of discharges and days of care, and average lengths of stay. The estimates are presented by age group, and gender.

The hospital episodes related to women with deliveries, conditions diagnosed, and procedures performed, as well as to new-born infants are included in this report. Statistics on Obstetric cases are also reported on in much greater detail by the DHI National Obstetric Information System (NOIS).

Medical data for hospitalised patients are coded according to the *International Classification of Diseases, 10th Revision (ICD-10)*. A maximum of four diagnoses (1 main and 3 other diagnoses) and two for external cause of injury can be coded for each medical record. Operations/procedures are coded in ICD-9 CM-vol3 (procedures). Again four procedures can be coded. Within the conditions diagnosed and procedures performed, some specific categories will be presented because of large frequencies or because they are of special interest.

Familiarity with the definitions used in NHIS is important in interpreting the data on hospital utilisation. A list of definitions of terms used in this report is found at the back.

Summary

- During 2005, a total of 4363 patients, excluding newborn infants but including day cases, were admitted to Gozo General Hospital. These patients used 17827 days of care.
- The overall average length of stay was of 4.06 days.
- Of all patients discharged from hospital, 24.0% were 75 years of age and over.
- 52.0% of all hospital admissions were of an emergency nature.
- Private referrals to hospital accounted for 23.9% of all hospital episodes. 47.8% of cases were self referred.
- Spontaneous vaginal delivery and abdominal pain, unspecified, were the leading causes of hospitalisation during the period of this report. These two diagnoses accounted for 242 and 182 discharges respectively and together made up 9.7% of all main diagnosis.
- Approximately 8.6% of patients aged 65 and over discharged from hospitals had been admitted for heart disease.
- At least one procedure was performed on 48.6% of patients discharged from Gozo General Hospital in 2005. 91.3% of these procedures were of a surgical nature.
- Approximately 30.5% of all surgical procedures were performed on patients who were 65 years of age or older.
- Obstetric procedures (episiotomy, Caesarean section, and repair of obstetric laceration) accounted for 11.2% of the surgical procedures performed on hospital inpatients.
- 5.2% of all hospital admissions were due to injuries. 17.5% of these were due to recorded traffic accidents, 47.4% were due to accidents which happened at home, and 3.9% were due to accidents which occurred at sea or on the sea side,
- In 2005, 3.5% of patients discharged from hospital were discharged dead.
- 1.3% of patients discharged were discharged to a Government geriatric hospital or to a private residential home.
- Approximately 6.1% of hospitalised patients had a main diagnosis of heart disease or malignant neoplasm but 42% of the deaths that occurred in hospital were the result of either of these two diseases.

Hospital data

Gozo General Hospital is the main State (Public) hospital in Gozo. It is a general hospital (ICHA*classification: HP.1.1) but also has dedicated geriatric care and psychiatric care wards.

Hospital facilities for 2004 were as follows:

| Facilities | Total Number |
|---------------------------------------|--------------|
| Acute care beds (capacity) | 104 |
| Psychiatric (mental health) care beds | 54 |
| Long term care beds | 121 |
| Renal Unit | 4 |
| Total beds | 283 |
| Operation Theatres | 2 |

*

Table 1.1: Facilities at Gozo General Hospital

Bed complement per ward is shown in the following table:

| Ward | Number of Beds |
|--|----------------|
| Male General Ward (actual beds excluding “corsia”) | 31 |
| Female General Ward (actual beds excl. “corsia”) | 31 |
| Critical Care Unit (CCU) | 7 |
| Maternity Ward | 10 |
| Gynaecology Ward | 10 |
| Paediatric Ward | 15 |
| Male Geriatric Ward | 40 |
| Female Geriatric Ward | 81 |
| Short Stay Ward (Psychiatric) | 12 |
| Long Stay Ward (Psychiatric) | 42 |
| Renal Unit | 4 |
| Total Beds | 283 |

*

Table 1.2: Facilities at Gozo General Hospital – bed compliment by ward

Gozo General Hospital has a complement of 28[♥] physicians and dentists, a “caring” staff of 355[♥] persons (including midwives, nurses, nursing aides and care workers), 43[♥] health care professionals and a further 170 persons

* : International Classification of Health accounts

* : Data as supplied by Gozo general Hospital, February, 2006.

♥ : Numbers quoted refer to “head counts”

employed in other duties. The latter include Administrative staff, security officers, telephone operators, cooks, gardeners, an engineer, maintenance technical officers, boiler attendants, drivers, mortuary attendants, gate keepers, and trained persons in the tailoring section.

Hospital Episodes

Hospital episodes, or cases, in this report are counted via admission. Thus the number of episodes mentioned will refer to episodes where the date of admission was between 1st. January, 2005 and 31st. December, 2005.

Admissions data

Obvious cases of “ward attenders” for whom a hospital activity data sheet was filled up and whose data was initially entered in the Gozo General Hospital – Hospital Activity Analysis database (GGHAA), were flagged and were not counted with the admissions. This accounted for 16 records.

299 babies were born in hospital from 01/01/2005 to 31/12/2005. Babies born in hospital are not usually counted as admissions. These were flagged and were also not counted with the total admissions.

A total number of 4363* admissions were recorded in the twelve-month interval considered in this report (Table 1). This figure includes 44 episodes of care where the date of admission was before or on 31/12/2005 but where the date of discharge was in 2006. 2270 or 52.0% were emergency cases, 782 or 17.9% were elective/planned episodes, 180 were unplanned readmissions less than 28 days following discharge from hospital for the same condition and 1129 were day cases.

| Age groups (years) | Males | Females | Unspecified | Total | % of all patients |
|----------------------|-------------|-------------|-------------|-------------|-------------------|
| Under 1 (0) | 13 | 14 | 0 | 27 | 0.62 |
| 0 – 4 | 53 | 55 | 0 | 108 | 2.47 |
| 5 – 14 | 111 | 59 | 0 | 170 | 3.89 |
| 15 – 24 | 145 | 228 | 0 | 373 | 8.55 |
| 25 – 34 | 102 | 327 | 0 | 429 | 9.83 |
| 35 – 44 | 172 | 224 | 0 | 396 | 9.08 |
| 45 – 54 | 271 | 278 | 0 | 549 | 12.58 |
| 55 – 64 | 327 | 261 | 0 | 588 | 13.48 |
| 65 – 74 | 359 | 313 | 0 | 672 | 15.40 |
| 75 – 84 | 401 | 322 | 0 | 723 | 16.57 |
| 85 – 94 | 158 | 146 | 0 | 304 | 6.98 |
| 95 & over | 10 | 11 | 0 | 21 | 0.48 |
| Unspecified | 2 | 1 | 0 | 3 | 0.07 |
| Total | 2124 | 2239 | 0 | 4363 | 100 |

Table 2: Age/gender distribution of patients in completed hospital episodes

* This figure denotes the total number of admissions from 01/01/2005 to 31/12/2005 including day cases but excluding babies born in hospital and “ward attenders”.

Ward admissions, and total admissions by method of admission, are shown schematically in table 3 and accompanying chart I.

| Admitting Ward | Elective | Emergency | Day Cases | Readmiss. + Unspecified | TOTAL |
|----------------|----------|-----------|-----------|-------------------------|-------|
| MGW | 194 | 872 | 504 | 147+0 | 1717 |
| FGW | 242 | 768 | 595 | 21+2 | 2628 |
| CCU | 25 | 342 | 12 | 8+0 | 387 |
| Paediatric | 22 | 259 | 11 | 3+0 | 295 |
| Maternity | 296 | 20 | 1 | 0+0 | 317 |
| Gynaecology | 4 | 4 | 6 | 0+0 | 14 |
| SSW | 0 | 5 | 0 | 0+0 | 5 |
| Total | 783 | 2270 | 1129 | 179+2 | 4363 |

MGW: Male ward (general), FGW: Female ward (General), CCU: Critical care unit, SSW: Short stay ward (Psychiatric)

Table 3: Total admissions (including day cases) from 01/01/2005 to 31/12/2005

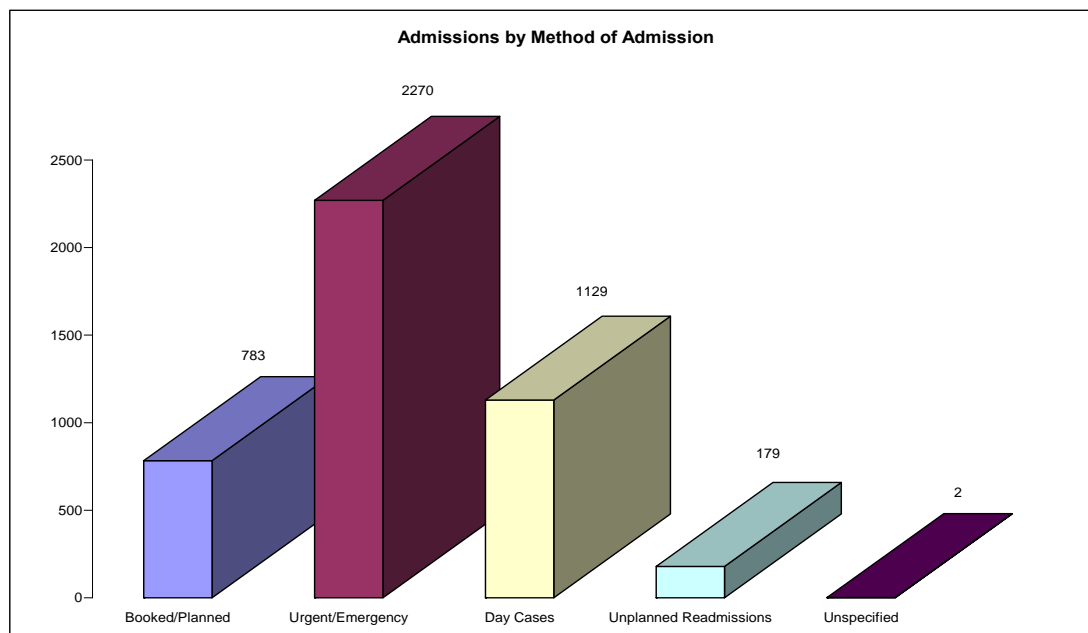


Chart I: All admissions (excluding babies born in hospital and “ward attenders”) by method of admission

There was very poor capture of admissions to Short Stay Ward. Admissions to Gynaecology Wards also showed poor capture. A reason for this may be that Gynaecology admissions may have been erroneously labelled as admissions to Female General Ward. No data sheets of admissions to the Geriatric Wards were received.

Comparison with ADT module – PAS system.

The ADT module – PAS system shows a total of 4732 episodes of care (inpatient admissions & day cases) for the period considered in this report. Age and gender distribution of admissions according to the GGHHAA database and the PAS are shown in the table 5.

| Age Groups | GGHHAA | | | PAS | | | |
|-----------------|-------------|-------------|-------------|-------------|-------------|-----------------|-------------|
| | Males | Females | Total | Males | Females | Unspecified Sex | Total |
| < 1 year | 13 | 14 | 27 | 25 | 19 | 0 | 44 |
| 1 – 4 | 53 | 55 | 108 | 55 | 59 | 1 | 115 |
| 5 – 14 | 111 | 228 | 170 | 121 | 58 | 1 | 180 |
| 15 – 24 | 145 | 327 | 373 | 165 | 263 | 4 | 432 |
| 25 – 34 | 102 | 224 | 429 | 112 | 340 | 2 | 454 |
| 35 – 44 | 172 | 278 | 396 | 190 | 258 | 1 | 449 |
| 45 – 54 | 271 | 261 | 549 | 281 | 308 | 2 | 591 |
| 55 – 64 | 327 | 313 | 588 | 347 | 286 | 3 | 636 |
| 65 – 74 | 359 | 322 | 672 | 359 | 306 | 26 | 691 |
| 75 – 84 | 401 | 146 | 723 | 399 | 356 | 10 | 765 |
| 85 – 94 | 158 | 11 | 304 | 159 | 145 | 3 | 307 |
| 95 & Over | 10 | 11 | 21 | 6 | 6 | 0 | 12 |
| Unspecified age | 2 | 1 | 3 | 34 | 18 | 4 | 56 |
| TOTAL | 2124 | 2239 | 4363 | 2253 | 2422 | 57 | 4732 |

Table 4: Age/gender distributions of admissions according to GGHHAA and PAS

The largest number of episodes of care were in the 75 – 84 age groups in both the GGHHAA database (723) and the PAS (765) system.

| Admitting Ward | GGHHAA | PAS | % Response Rate |
|-----------------------|-------------|-------------|-----------------|
| Male General Ward | 1717 | 1733 | 99.1% |
| Female General Ward | 2628 | 1488 | 176.6% |
| Critical Care Unit | 387 | 506 | 76.1% |
| Paediatric Ward | 295 | 333 | 88.6% |
| Maternity Ward | 317 | 343 | 92.4% |
| Gynaecology Ward | 14 | 170 | 8.2% |
| Short stay Ward | 5 | 157 | 3.2% |
| Female Geriatric Ward | 0 | 2 | 0% |
| Total | 4363 | 4732 | 92.2% |

Table 5: Percentage response rate by hospital ward

The percentage “response rate”, i.e. comparison between admissions on the GGHHAA database taken from episode data sheets sent from the hospital wards and admissions recorded on the PAS system, is shown in the table 5.

There is a large discrepancy between the episodes of care in the Female General Ward as recorded in the hospital activity database and PAS. This could be due in part to gynaecological episodes being incorrectly labeled as “admissions” to FGW on the data sheets, to obvious day cases which were incorrectly entered into the PAS system as “ward attenders”, and episodes which were not reported in the PAS system.

Admissions following accidents/injuries.

228 or 5.2% of all episodes of care were due to an external cause or injury. Of these, 108 or 47.4% were due to accidents/injuries which occurred at “home”, and 54 or 23.7% were due to accidents/injuries sustained on the road. 40 or 74.1% of the latter were due to specified road traffic accidents. Injuries sustained at the seaside accounted for 9 admissions or 3.9% of admissions to hospital due to accidents/injuries.

Admissions due to accidents/injuries had a total hospital stay of 1305 hospital days. The overall average length of stay was 5.72 days per patient.

A breakdown of the number of injuries sustained according to the site of accident/injury, which resulted in episodes of inpatient hospital care is shown in table 7 and chart II.

| Accident/Injury Site | Code | Number of cases | Hospital Stay |
|--|-------------|------------------------|----------------------|
| Home | 10.0 | 108 | 897 |
| Residential Institution | 10.1 | 4 | 7 |
| School, other institution and public administration area | 10.2 | 3 | 4 |
| Sports and athletic area | 10.3 | 5 | 10 |
| Sea & sea side | 10.3a | 9 | 18 |
| Street/motorway | 10.4 | 54 | 197 |
| Trade or service area | 10.5 | 8 | 30 |
| Industrial and construction area | 10.6 | 18 | 45 |
| Farm | 10.7 | 3 | 38 |
| Other specifies places | 10.8 | 7 | 11 |
| Unspecified place | 10.9 | 9 | 48 |
| Total | | 228 | 1305 |

Table 6: Number of Inpatient episodes and hospital stay due to accidents/injuries

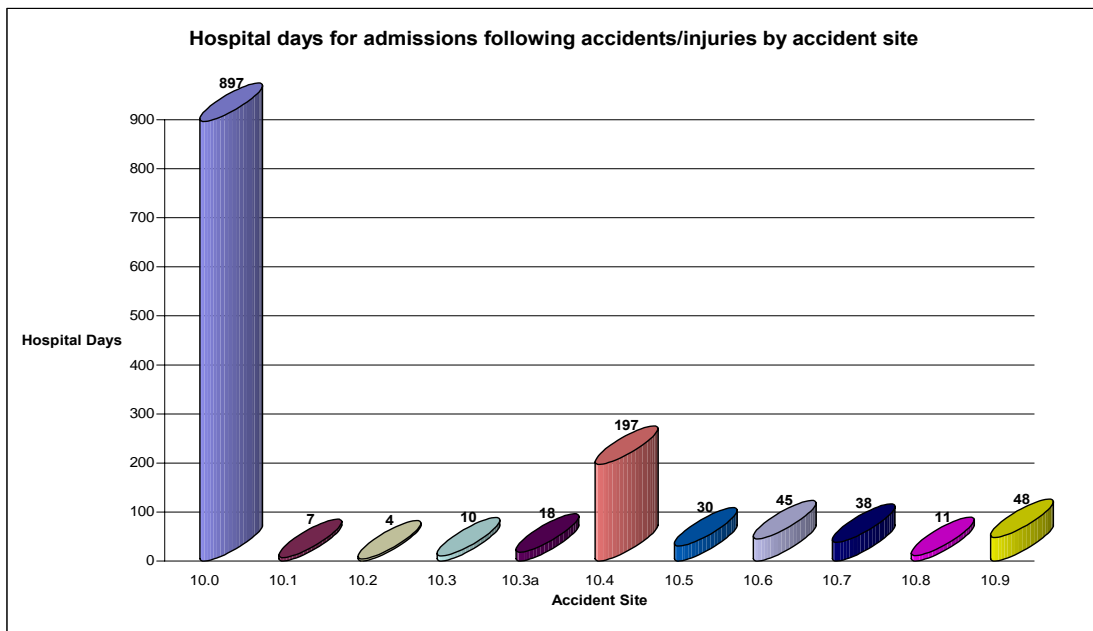


Chart II: Hospital days for “victims” of accidents/injuries by accident site

Day Cases

1129 cases of day care admissions are recorded in the hospital activity database from 01/01/2005 to 31/12/2005. 516 of these admissions were for males and 613 were for females.

The total number of day case admissions by age groups is shown in chart III.

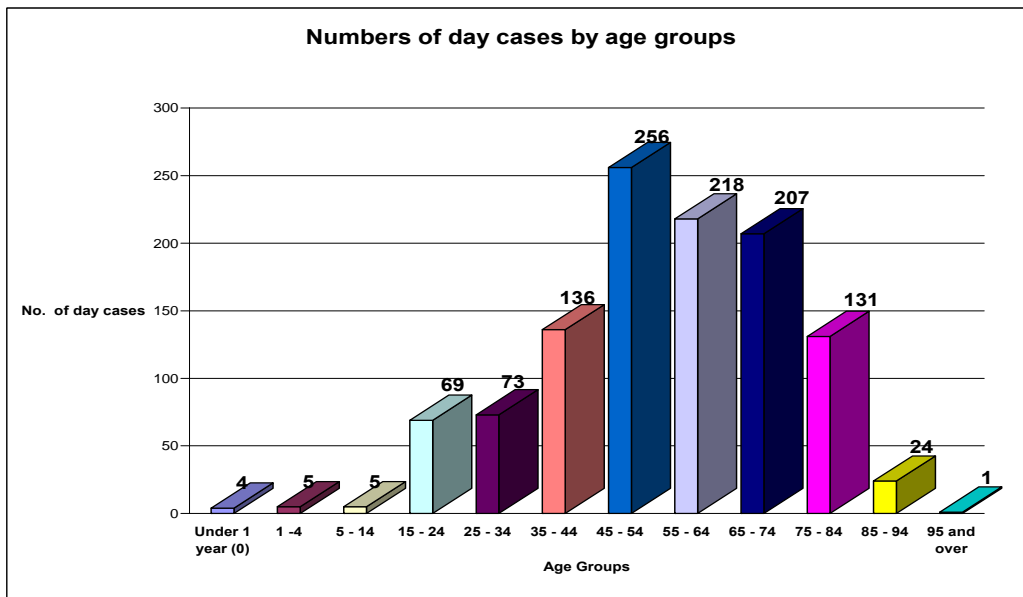


Chart III: Total day case distribution by age groups (years)

1044 day cases were admitted for surgical procedures. 558 were females and 486 were males. 92 were admitted for non surgical procedures. 16 day cases had both surgical and non surgical procedures performed while 9 cases had no procedure performed. The top two non-surgical procedures were infusion of therapeutic or prophylactic substances (ICD9 CM codes: 99.29, 99.14) which accounted for 44 day case admissions, and blood transfusion (ICD9 CM code: 99.03) in 12 day cases.

The distribution of surgical procedures by age groups and gender performed on day cases is shown in chart IV.

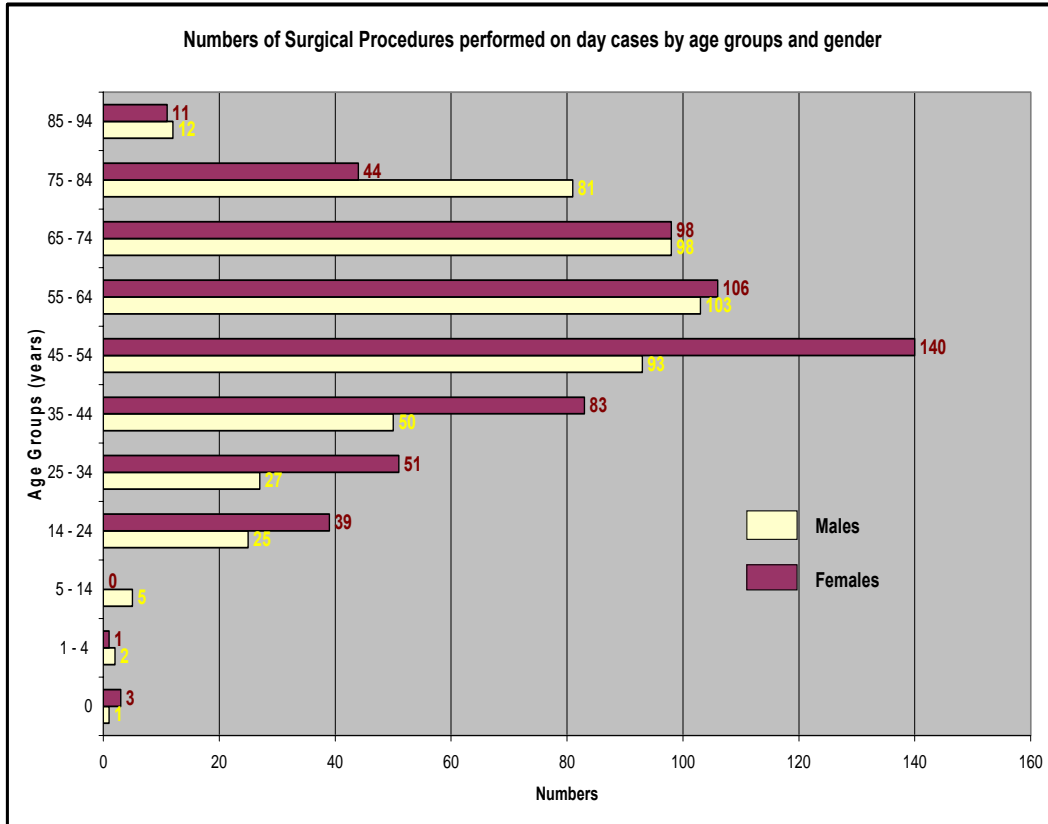


Chart IV: Age groups and gender distribution in patients admitted as day cases with surgical procedures

The 1044 patients admitted for day care surgical procedures had 1074 procedures performed between them. 1014 patients had a single procedure performed while 30 patients had two surgical procedures performed.

Other considerations re admissions

Sources of hospital admissions for the one year period under consideration were as follows (Table 7):

| Source | Number of cases | % of all Admissions |
|-----------------------------|------------------------|----------------------------|
| Usual Residence | 3918 | 89.80% |
| Temporary/summer residence | 89 | 2.04% |
| Prison | 0 | 0% |
| Government Hospital | 86 | 2.04% |
| Government Residential home | 10 | 0.22% |
| Private hospital/clinic | 1 | 0.02% |
| Private residential home | 10 | 0.22% |
| Accident site | 228 | 5.23% |
| Medical Institution abroad | 1 | 0.02% |
| Unspecified | 20 | 0.41% |
| Total | 4363 | 100% |

Table 7: Sources of all hospital admissions

The type of anticipated hospital inpatient care given is shown in table 8.

| Care Type | Number of Admissions |
|--|-----------------------------|
| Acute Care | 4233 |
| Rehabilitative care | 34 |
| Palliative care | 29 |
| Geriatric evaluation and management | 12 |
| Psycho geriatric care | 0 |
| Mental health care (Psychiatric care) | 0 |
| Maintenance care (includes "social cases") | 40 |
| New-born care | 0 |
| Other admitted care | 15 |
| Total | 4363 |

Table 8: Admissions by type of care given

"Public referrals"^Ψ for admission to hospital accounted for 1176 or 26.9% of all hospital episodes, while 1042 or 23.9% were from "private"^{ΨΨ} referrals. 2086 patients or 47.8% of all patients referred themselves to hospital. In 59 cases, the type of referral to hospital was not specified.

^Ψ Public referrals include hospital referrals from other state hospital/state residential homes, geriatric hospitals and also referrals from Health Centres and by Health Centre doctors.

^{ΨΨ} Private referrals include referrals from private health care facilities, including private residential home and also referrals by private community family doctors/specialists in Family Medicine.

Discharges

There are 4319 reported discharges in the GGHAA database for the period from 01/01/2005 to 31/12/2005. This figure is however not actual as it does not catch those episodes where the date of admission to hospital was before the 1st. January and it does not include the 44 admissions which were admitted in 2005 but discharged in 2006. Admissions in 2004 may feature in the 2004 database of hospital activity. As stated earlier, hospital episodes are counted via admission in this report.

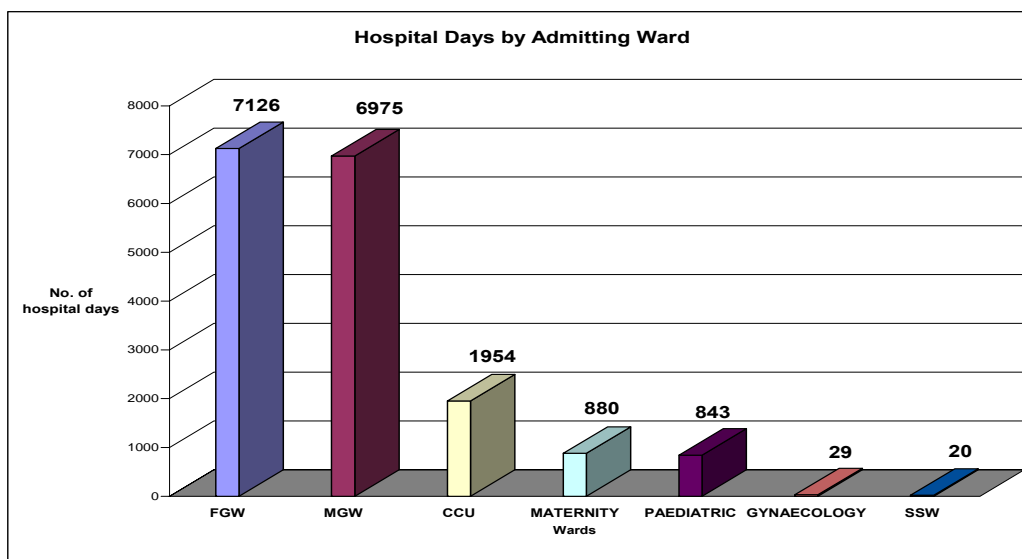
Hospital stay and discharge data on hospital episodes

There were 4363 reported episodes of care, excluding “ward attenders” and babies born in hospital, at Gozo General Hospital. 1129 of these were related to day cases with a hospital stay of 0 days. In-patient episodes of care (i.e.: 4363) used up a total of 17,827 days of care.

The overall average length of stay (ALOS) was 4.1 days. The ALOS, excluding day cases, was 5.5 days (17,827/3234). ALOS, excluding day cases, and patients admitted for respite care (45 patients), who tended to have very long hospital stays, works out at 5.2 days.

1048 patients overall who were admitted for some form of care in Gozo General Hospital were 75 years old and over. This represents 24.02% of all admissions. 864 in-patient admissions are recorded for persons aged 75 years or over. These represented 26.72% of all in-patient admissions and they used up 8160 or 45.8% of the total days of care (hospital days).

Charts V and VI show schematically hospital days by Ward of admission, and by Speciality respectively.



FGW: Female Ward (General), MGW: Male Ward (General), CCU: Critical care unit, SSW: Short stay ward

Chart V: Total hospital days by ward of admission

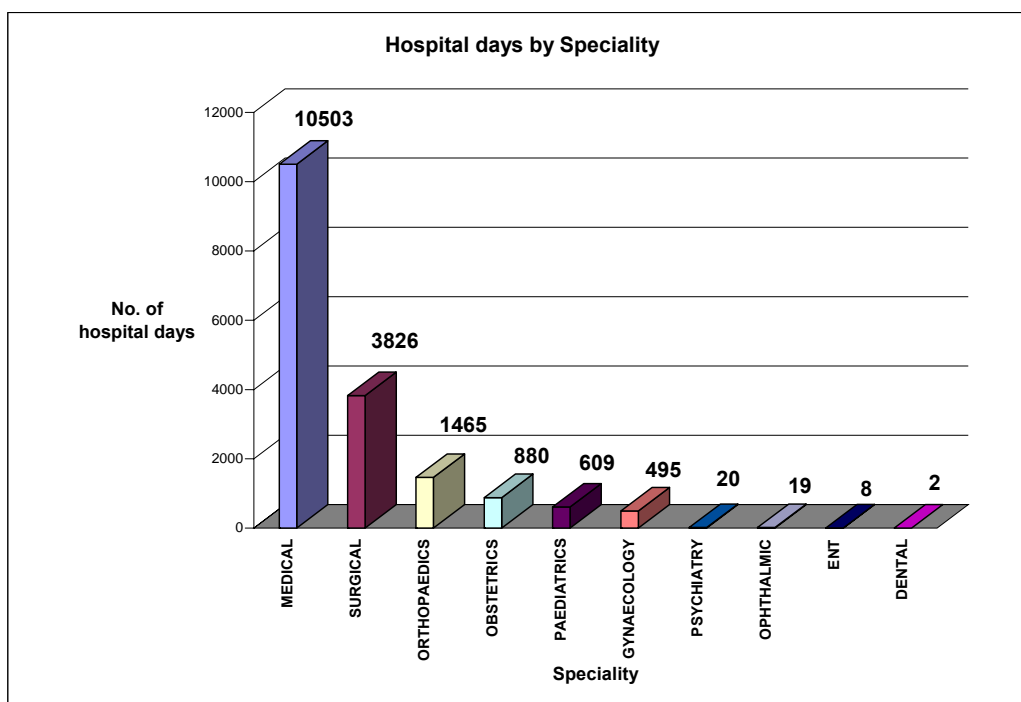


Chart VI: Hospital days by Speciality

Table 9 shows the number of hospital days and overall ALOS by age groups and gender.

| Age groups | Males | Hosp. Days | ALOS | Females | Hosp. Days | ALOS | TOTAL ALOS |
|-----------------|-------|------------|------|---------|------------|------|------------|
| < 1 year | 12 | 30 | 2.5 | 11 | 52 | 4.7 | 3.6 |
| 1 – 4 | 51 | 145 | 2.8 | 52 | 162 | 3.1 | 3.0 |
| 5 – 14 | 106 | 280 | 2.6 | 59 | 181 | 3.1 | 2.8 |
| 15 – 24 | 116 | 274 | 2.4 | 188 | 447 | 2.4 | 2.4 |
| 25 – 34 | 75 | 177 | 2.4 | 281 | 749 | 2.7 | 2.6 |
| 35 – 44 | 118 | 400 | 3.4 | 142 | 429 | 3.0 | 3.2 |
| 45 – 54 | 175 | 595 | 3.4 | 118 | 661 | 5.6 | 4.3 |
| 55 – 64 | 222 | 1270 | 5.7 | 148 | 789 | 5.3 | 5.6 |
| 65 – 74 | 256 | 1497 | 5.8 | 209 | 1379 | 6.6 | 5.2 |
| 75 – 84 | 320 | 2644 | 8.3 | 272 | 2544 | 9.4 | 8.8 |
| 85 – 94 | 145 | 1098 | 7.6 | 135 | 1778 | 13.2 | 10.3 |
| 95 & > | 10 | 127 | 12.7 | 10 | 116 | 11.6 | 12.2 |
| Unspecified age | 2 | 1 | 0.5 | 1 | 2 | 2 | 1.0 |
| TOTAL | 1608 | 8538 | 5.3 | 1626 | 9289 | 5.7 | 5.5 |

Table 9: Hospital days and ALOS by age groups and gender

2911 in-patients (90.0%) were discharged on medical advice, 151 (4.7%) were discharged at request, and 19 patients had no specified method of discharge. 153 patients (4.7%) were discharged dead.

Table 10 shows the destination of the discharged patients (excluding those people admitted where the outcome of the episode was death).

| Discharge Destination | Number of discharges | % of discharges |
|--|----------------------|-----------------|
| Usual Residence (including temporary/summer residence) | 2919 | 90.26% |
| Police/legal custody | 2 | 0.06% |
| Government Hospital | 92 | 2.84% |
| Government Residential Home | 32 | 0.99% |
| Private hospital/Clinic | 0 | 0.00% |
| Private Residential home | 9 | 0.28% |
| Medical Institution abroad | 3 | 0.09% |
| Unspecified | 24 | 0.74% |
| Total | 3081 | 95.27% |

Table 10: Discharge destination as percentage of all discharges

153 patients were discharged dead. Chart VII shows the age group and gender distribution of these patients.

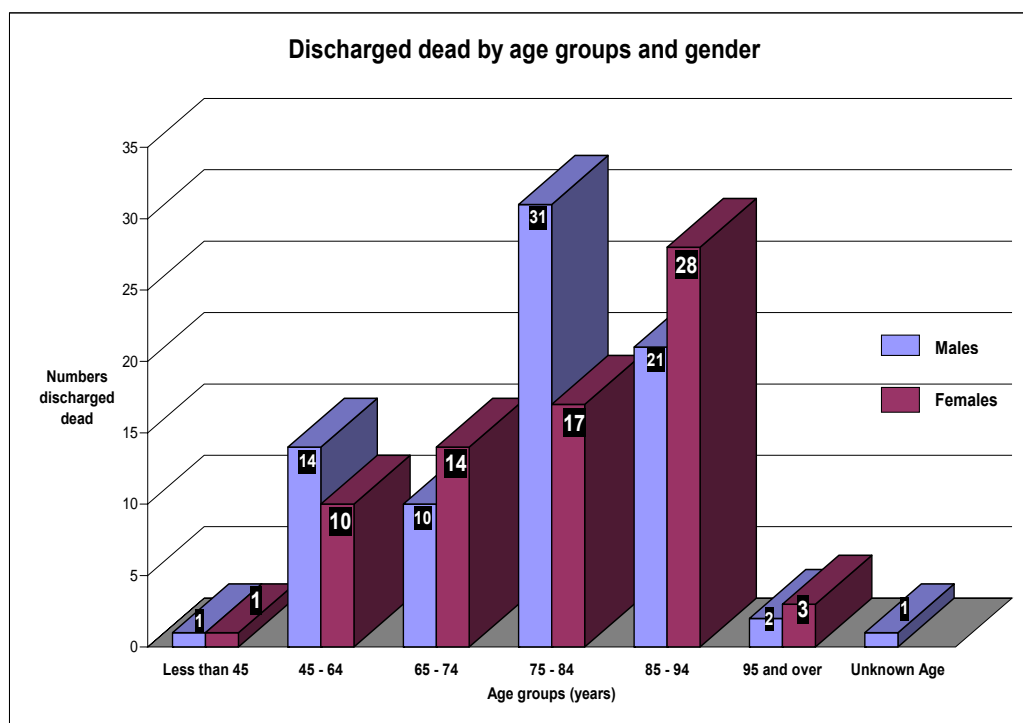


Chart VII: Discharged dead by age groups

The following table shows the number of patients discharged dead and the rate of deaths for hospital discharges by selected diagnosis.

| ICD-10 Code | Main Diagnosis | Number of Deaths | | % of discharges Ψ | |
|----------------|---|------------------|----------|------------------------|----------|
| | | < 65 yrs | > 65 yrs | < 65 yrs | > 65 yrs |
| I64 | Cerebrovascular accident | 1 | 11 | 0.05% | 0.81% |
| C--- | Cancer | 15 | 25 | 0.80% | 1.84% |
| J22 | Chest infection | 0 | 13 | 0.00% | 0.96% |
| A41.9 | Septicaemia | 0 | 5 | 0.00% | 0.37% |
| I50.-- | Heart failure | 2 | 10 | 0.11% | 0.74% |
| I21.- & I25.-- | Myocardial infarction & Ischaemic heart disease | 2 | 11 | 0.11% | 0.81% |
| J18.- | Pneumonia | 1 | 13 | 0.05% | 0.96% |
| | Other | 5 | 39 | 0.27% | 2.87% |
| | Subtotal | 26 | 127 | 1.39% | 9.34% |
| | Overall total | 153 | | 4.73% | |

Ψ : based on 1874 discharges under 65 years and 1360 discharges aged 65 or over. (Total inpatient discharges = 3234)

Table 11: Number & rate of deaths for hospital discharges by age and selected main diagnosis

Table 12 shows some of measures used to study hospital utilisation.

| Measure of Utilisation | July – Dec. 2004 |
|---|---------------------|
| Total number of episodes considered in this report | 4363 |
| “Discharge” Rate | 13650 * |
| Total number of bed days | 17827 |
| Rate of bed days per 100,000 population | 55772 * |
| Overall ALOS in days | 4.1 |
| ALOS ,excluding day cases | 5.5 |
| ALOS, excluding day cases, & respite patients | 5.2 |
| % bed occupancy rate (for the 104 acute care beds only) ¹ | 46.91% ¹ |
| Overall bed turnover rate for acute care beds ² | 41.90 ² |

* based on total Gozo population of 31964 – NSO Demographic review, 2004.

Table 12: Selected measures of all hospital utilisation

The overall discharge rate for patients 75 years of age and over was 3278.7 per 100,000 population. This was significantly higher than the rate of 2102.4 per 100,000 population for patients 65–74 years of age.

¹ Calculation: 17807 bed days (17827 less 20 bed days reported for SSW) multiplied by 100 and divided by the product of 365 days and 104 acute care beds.

² Calculation: 4358 episodes of care (4363 less 5 reported episodes of care in SSW) divided by 104 (number of acute care beds)

Diagnosis

Hospital use measures, i.e. number of discharges and discharge rate, and bed days, bed day rate and overall average length of stay (ALOS) for selected main diagnostic categories are shown in tables 13 and 14. The categories displayed account for more than half of the discharges and days of care at Gozo General Hospital in the twelve month period being considered.

| ICD-10 code | Diagnosis | Discharges | |
|--------------|---|----------------------|-----------------|
| | | Number of discharges | Discharge rate* |
| D25.9 | Myoma of uterus - unspecified | 27 | 84.5 |
| D64.9 | Anaemia - unspecified | 32 | 100.1 |
| E14 | Diabetes Mellitus – unspecified or with complications | 45 | 140.8 |
| E16 | Hypoglycaemia | 21 | 65.7 |
| F10.0 | Acute alcohol intoxication | 19 | 59.4 |
| G20 | Parkinsonism/ Parkinson's disease | 3 | 9.4 |
| G45.9 | Transient cerebral ischaemic attack - unspecified | 25 | 78.2 |
| H26.9 | Cataract - unspecified | 126 | 394.2 |
| I45.9 | Heart block - unspecified | 10 | 31.3 |
| I48 | Atrial fibrillation/flutter | 61 | 190.8 |
| I50.0 | Congestive heart failure | 31 | 97.0 |
| I64 | Stroke/Cerebrovascular accident | 58 | 181.5 |
| I80.2 | Deep vein thrombosis | 17 | 53.2 |
| J20.9 | Acute bronchitis - unspecified | 25 | 78.2 |
| J22 | Acute lower respiratory tract infection/chest inf. | 153 | 478.7 |
| K30 | Dyspepsia | 37 | 115.8 |
| K40.9 | Unilateral or unspecified inguinal hernia | 50 | 156.4 |
| K42.9 | Umbilical hernia without complications | 12 | 37.5 |
| K52.9 | Non infective gastroenteritis - unspecified | 133 | 416.1 |
| K62.5 | Haemorrhage of anus/rectum / rectal bleeding | 76 | 237.8 |
| M54.9 | Dorsalgia / backache - unspecified | 15 | 46.9 |
| N23 | Unspecified renal colic | 43 | 134.5 |
| N39.0 | Urinary tract infection – site not specified | 33 | 103.2 |
| N80.9 | Endometriosis - unspecified | 12 | 37.5 |
| N85.2 | Bulky/enlarged uterus | 3 | 9.4 |
| N92.0 | Menorrhagia | 46 | 143.9 |
| O80.9 | Single spontaneous delivery | 242 | 757.1 |
| O82.0 | Delivery by elective LSCS | 34 | 106.4 |
| O82.1 | Delivery by emergency LSCS | 20 | 62.6 |
| R00.2 | Palpitations | 16 | 50.1 |
| R06.0 | Dyspnoea | 33 | 103.2 |
| R07.4 | Chest pain – unspecified | 160 | 500.6 |
| R10.1 | Upper abdominal pain/epigastric pain | 92 | 287.8 |
| R10.3 | Pain localized to lower abdomen | 41 | 128.3 |

| ICD-10 code | Diagnosis | Discharges | |
|---------------|-------------------------------------|----------------------|-----------------|
| | | Number of discharges | Discharge rate* |
| R10.4 | Unspecified abdominal pain | 183 | 572.5 |
| R11 | Nausea and vomiting | 7 | 21.9 |
| R31 | Unspecified haematuria | 33 | 103.2 |
| R33 | Retention of urine | 19 | 59.4 |
| R42 | Dizziness / vertigo – not specified | 16 | 50.1 |
| R50.9 | Fever - unspecified | 18 | 56.3 |
| R53 | General physical deterioration | 18 | 56.3 |
| R55 | Syncope and collapse / fainting | 64 | 200.2 |
| S09.9 | Unspecified head injury | 92 | 287.8 |
| S72.-- | Miscellaneous fractures of femur | 32 | 100.1 |
| Z75.5 | Respite care (include social cases) | 45 | 140.8 |

*: Based on total population estimate of 31964 according to Demographic Review 2004 - NSO

Table 13: Number of discharges and discharge rate from hospital by selected main discharge diagnosis

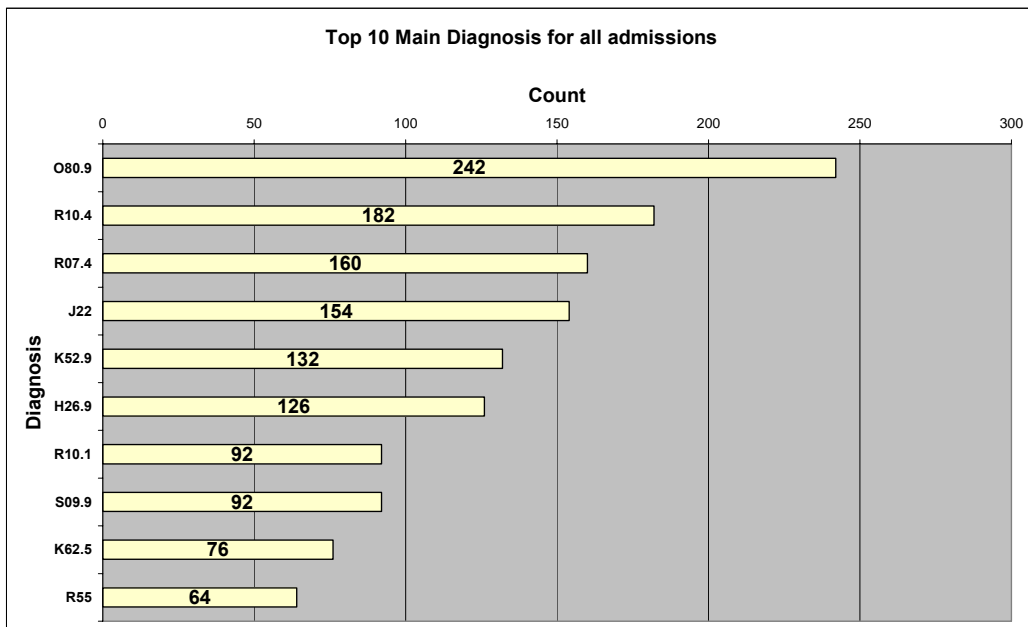
| ICD-10 Code | Diagnosis | Bed Days | | ALOS (days) |
|--------------|---|--------------------|------------------------------|-------------|
| | | Number of bed days | *Rate per 100,000 population | |
| D25.9 | Myoma of uterus - unspecified | 110 | 344.1 | 4.1 |
| D64.9 | Anaemia - unspecified | 105 | 328.5 | 3.3 |
| E14 | Diabetes Mellitus – unspecified or with complications | 460 | 1439.1 | 10.2 |
| E16.2 | Hypoglycaemia - unspecified | 94 | 294.1 | 4.5 |
| F10.0 | Acute alcohol intoxication | 16 | 50.1 | 0.8 |
| G20 | Parkinsonism / Parkinson's Disease | 36 | 112.6 | 12.0 |
| G45.9 | Transient cerebral ischaemic attack - unspecified | 111 | 347.3 | 4.4 |
| H26.9 | Cataract - unspecified | 11 | 34.4 | 0.1 |
| I45.9 | Heart block - unspecified | 27 | 84.5 | 2.7 |
| I48 | Atrial fibrillation/flutter | 171 | 535.0 | 2.8 |
| I50.0 | Congestive heart failure | 215 | 672.6 | 6.9 |
| I64 | Stroke/Cerebrovascular accident | 989 | 3094.1 | 17.1 |
| I80.2 | Deep vein thrombosis | 79 | 247.2 | 4.6 |
| J20.9 | Acute bronchitis - unspecified | 158 | 494.3 | 6.3 |
| J22 | Acute lower respiratory tract infection/chest inf. | 1315 | 4114.0 | 8.6 |
| K30 | Dyspepsia | 11 | 34.4 | 0.3 |
| K40.9 | Unilateral or unspecified inguinal hernia | 151 | 472.4 | 3.0 |
| K42.9 | Umbilical hernia without complications | 25 | 78.2 | 2.1 |
| K52.9 | Non infective gastroenteritis - unspecified | 351 | 1098.1 | 2.6 |

| ICD-10 Code | Diagnosis | Bed Days | | ALOS (days) |
|---------------|--|--------------------|------------------------------|-------------|
| | | Number of bed days | *Rate per 100,000 population | |
| K62.5 | Haemorrhage of anus/rectum / rectal bleeding | 31 | 97.0 | 0.4 |
| M54.9 | Dorsalgia / backache - unspecified | 76 | 237.8 | 5.1 |
| N23 | Unspecified renal colic | 109 | 341.0 | 2.5 |
| N39.0 | Urinary tract infection – site not specified | 253 | 791.5 | 7.7 |
| N80.9 | Endometriosis - unspecified | 8 | 25.0 | 0.7 |
| N85.2 | Bulky/enlarged uterus | 10 | 31.3 | 3.3 |
| N92.0 | Menorrhagia | 63 | 197.1 | 1.4 |
| O80.9 | Single spontaneous delivery | 595 | 1861.5 | 2.5 |
| O82.0 | Delivery by elective LSCS | 146 | 456.8 | 4.3 |
| O82.1 | Delivery by emergency LSCS | 102 | 319.1 | 5.1 |
| R00.2 | Palpitations | 36 | 112.6 | 2.3 |
| R06.0 | Dyspnoea | 195 | 610.1 | 5.9 |
| R07.4 | Chest pain – unspecified | 572 | 1789.5 | 3.6 |
| R10.1 | Upper abdominal pain/epigastric pain | 154 | 481.8 | 1.7 |
| R10.3 | Pain localized to lower abdomen | 81 | 253.4 | 2.0 |
| R10.4 | Unspecified abdominal pain | 495 | 1548.6 | 2.7 |
| R11 | Nausea and vomiting | 42 | 131.4 | 6.0 |
| R31 | Unspecified haematuria | 51 | 159.6 | 1.5 |
| R33 | Retention of urine | 69 | 215.9 | 3.6 |
| R42 | Dizziness / vertigo – not specified | 47 | 147.0 | 2.9 |
| R50.9 | Fever - unspecified | 98 | 306.6 | 5.4 |
| R53 | General physical deterioration | 196 | 613.2 | 10.9 |
| R55 | Syncope and collapse / fainting | 273 | 854.1 | 4.3 |
| S09.9 | Unspecified head injury | 232 | 725.8 | 2.5 |
| S72.-- | Miscellaneous fractures of femur | 635 | 1986.6 | 19.8 |
| Z75.5 | Respite care (include social cases) | 1235 | 3863.7 | 27.4 |

*: Based on total population estimate of 31964 according to Demographic Review 2004 – NSO

Table 14: Number of bed days and bed day rate & ALOS by selected main discharge diagnosis

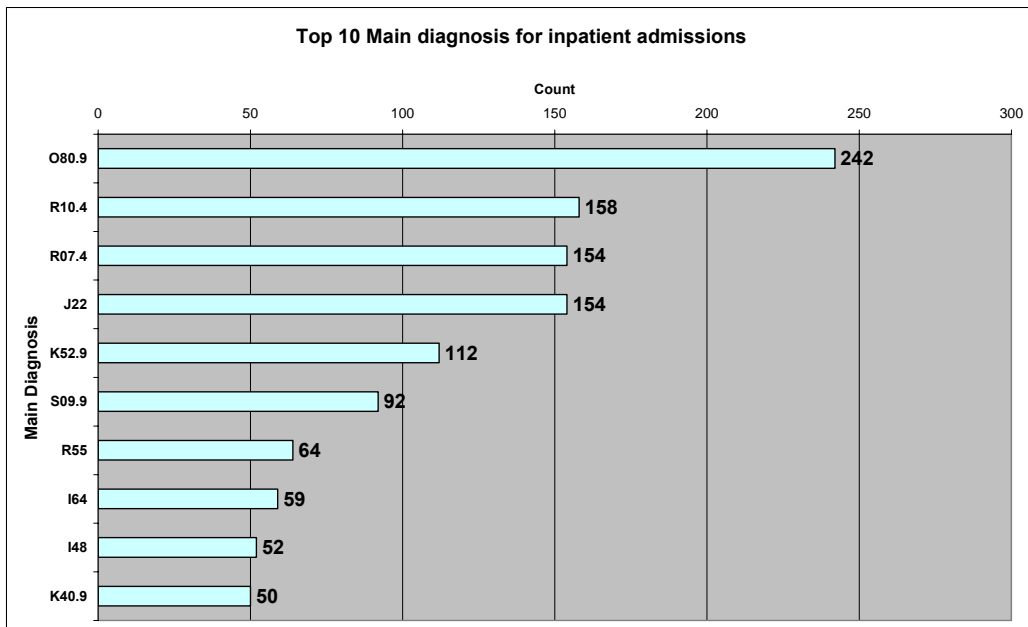
The top 10 main diagnosis for all admissions (including day cases) are shown in chart VIII



O80.9: normal vaginal delivery, R10.4: abdominal pain – unspecified, R07.4: chest pain – unspecified, J22: chest infection, K52.9: diarrhoea, colitis, unspecified gastroenteritis, H26.9: cataract- unspecified, R10.1: upper abdominal pain, S09.09: head injury – unspecified, K62.5: rectal bleeding, R55: fainting/collapse.

Chart VIII: Top 10 main diagnosis for all admissions

Chart IX shows the main diagnosis for episodes of care for inpatient admissions.



O80.9: normal vaginal delivery, R10.4: abdominal pain – unspecified, R07.4: chest pain – unspecified, J22: chest infection, K52.9: diarrhoea, colitis, gastroenteritis – unspecified, S09.9 – head injury – unspecified, R55: fainting/collapse, I64: cerebrovascular accident – unspecified, I48:atrial fibrillation/flutter, K40.9:unilateral or unspecified inguinal hernia without obstruction/gangrene.

Chart IX: Top 10 main diagnosis for inpatient admissions

Many of the “main diagnosis” are actually symptoms and not diseases as such. In many of these cases the patients were discharged without a definitive diagnosis as they were due for further investigation. The diagnosis “K52.9”, which is the ICD 10 code for *non infective gastroenteritis and colitis-unspecified*, includes cases of unspecified diarrhoea, colitis and gastroenteritis where no causative organism was reported and the symptoms usually subsided within a few days.

The obvious higher counts of certain main diagnosis in chart VIII are due to the fact that this chart includes the diagnosis of all episodes of care, including day cases, at Gozo General Hospital during 2005.

A total of 242 discharged patients were females hospitalised for spontaneous deliveries (ICD-10 code: O80.9). One other woman was admitted for delivery of twins, and two other women were delivered by “assisted delivery” (1 – “forceps” delivery and 1 – “Ventouse” delivery). Another 54 women were delivered by lower segment Caesarean section. This distribution is shown graphically in chart X below.

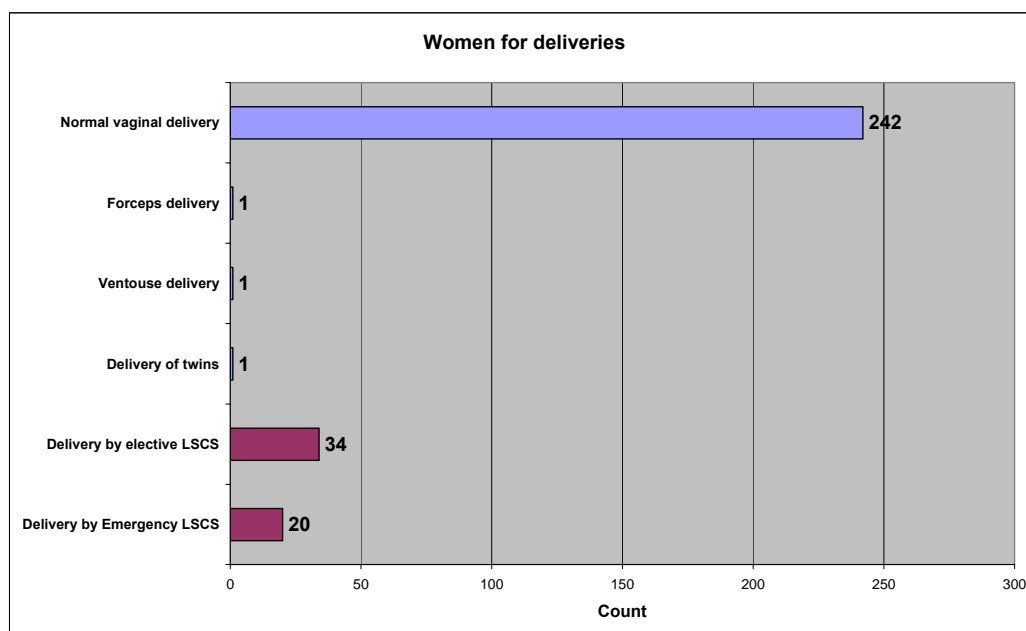


Chart X: Deliveries at Gozo General Hospital in 2005

These deliveries account for the recorded 299 babies born in hospital during 2005. There should actually be 300 babies recorded; however one delivery occurred on New Year’s night (2006) and is recorded on the 2006 database.

Episodes of care for females with spontaneous deliveries made up 5.5 % of all episodes for this period, their average length of stay was short (2.45 days) and they used 3.3% of inpatient bed days of care.

154 episodes of inpatient care had a main diagnosis of “chest infection” i.e. acute lower respiratory tract infection. These 154 patients used up 1320 or 7.4% of all hospital days. They had an ALOS of 8.6 days. Age group and gender distribution of these patients is shown in chart XI.

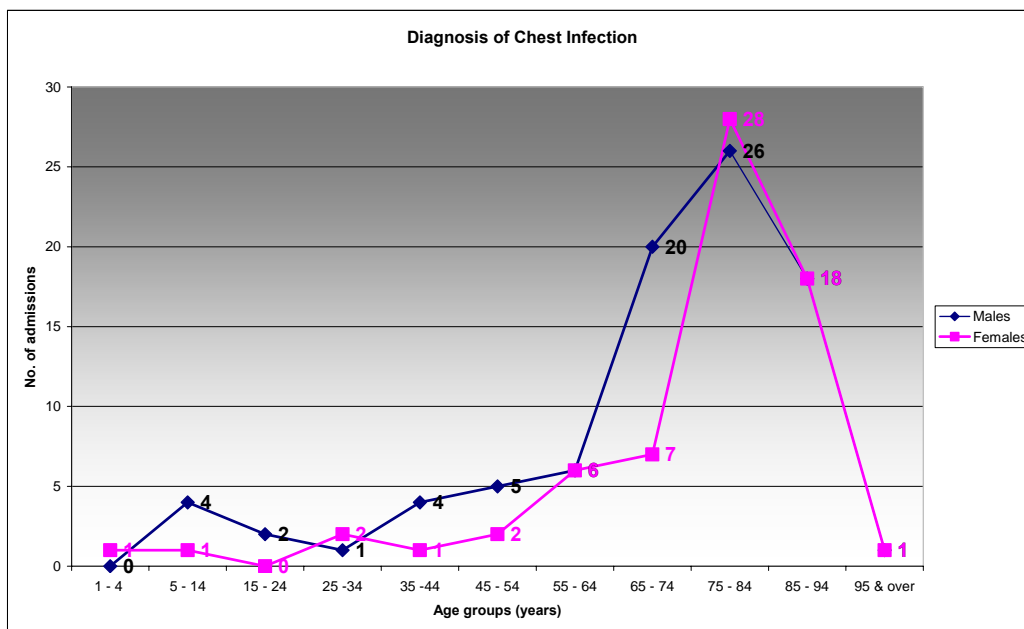


Chart XI: Age groups and gender distribution of episodes of care with a main diagnosis of “chest infection”

Chronic obstructive pulmonary disease (ICD-10 codes: J44) accounted for 35 discharges or 0.80% of all hospital discharges. The average length of stay was 6.94 days. There were 15 discharges with a main diagnosis of asthma (J45) and they used up 52 bed days. 62 discharges were for a main diagnosis of acute bronchitis and pneumonia (J18 and J20). These had an average length of stay of 8.92 days and accounted for 553 or 4.95% of all bed days.

Patients with a main diagnosis of heart disease accounted for 194 inpatient episodes of care or 4.4% of all episodes. They had an average length of stay of 5.22 days and used up 1012 or 5.7% of the total bed days. These patients include those with main diagnoses of hypertension and hypertensive heart disease, acute myocardial infarction, chronic ischaemic heart disease and other ischaemic heart disease, congestive heart failure, and cardiac arrhythmias (ICD10 codes: I10-I15, I20-I25, I30-I52) . Myocardial infarction and ischaemic heart disease were the main diagnosis for 44 or 22.6% of the heart disease discharges. They had an ALOS of 6.8 days. There were ten discharges with a main diagnosis of chronic ischaemic heart disease, their ALOS was 13.9 days and the patients were in the 70 and over age bracket.

The diagnosis in 59 episodes of inpatient care was cerebrovascular accident – unspecified (CVA). The patients in these episodes of care used up 995 or 5.6% of all hospital days. Twelve patients were discharged dead. The age and gender distribution of these episodes are shown in the chart below.

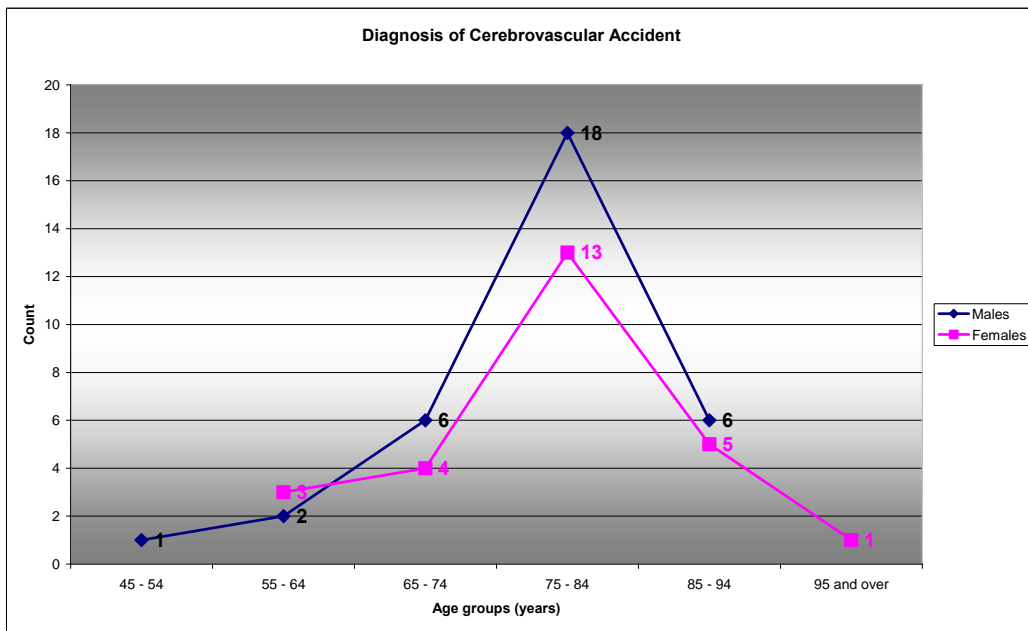


Chart XII: Age group/gender distribution of episodes of care with a diagnosis of cerebrovascular accident

Malignant neoplasms (ICD-10 codes: C00 – C97) were the main diagnosis for 73 patients or 1.7% of all discharges. The average length of stay for discharged patients with malignant neoplasms was 11.9 days and they used 4.9% of the total bed days. The largest number of episodes with a main diagnosis of malignant neoplasm was in the 65 – 74 age group for females and in the 74 – 84 age group for males. Age and gender distribution of these episodes of care and the most common sites of malignant neoplasm recorded are shown in charts XIII and XIV.

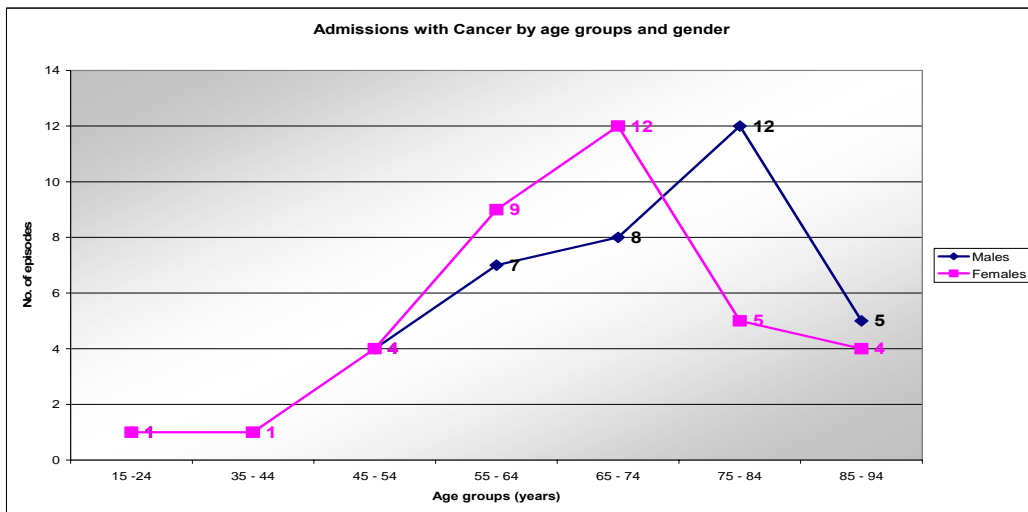


Chart XIII: Age group and gender distribution of episodes of care with a main diagnosis of malignant neoplasm

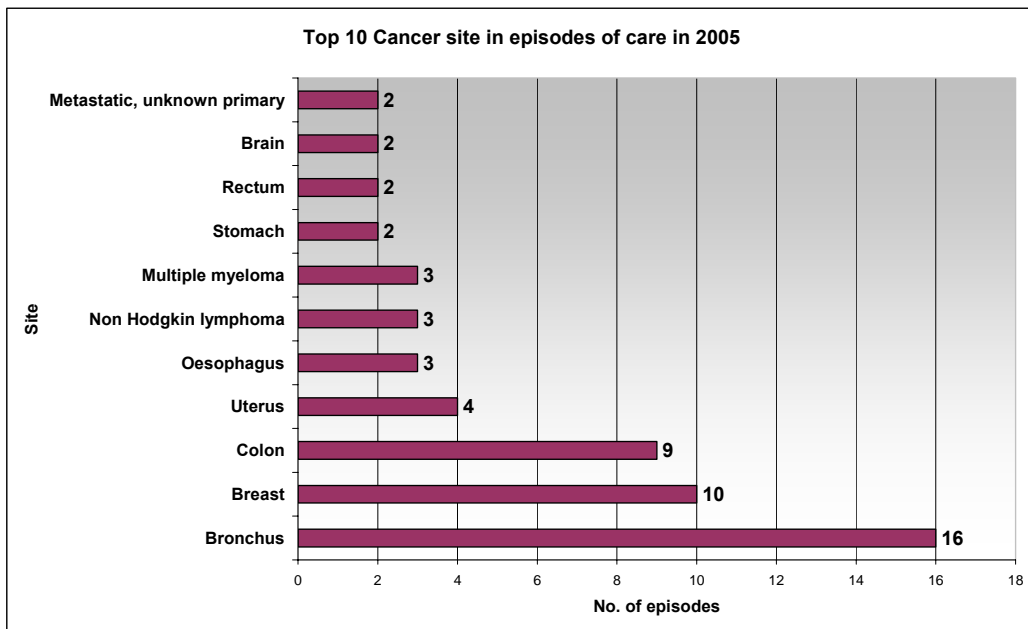


Chart XIV: Top 10 most common malignant neoplasms encountered in episodes of care at Gozo General Hospital in 2005

Fractures of the femur (ICD-10 code: S72) accounted for 32 or 0.73% of all hospital discharges. These had an average length of stay of 19.8 days and used up 635 or 3.6% of bed days.

The age group and gender distribution of these episodes of care is shown in chart XV

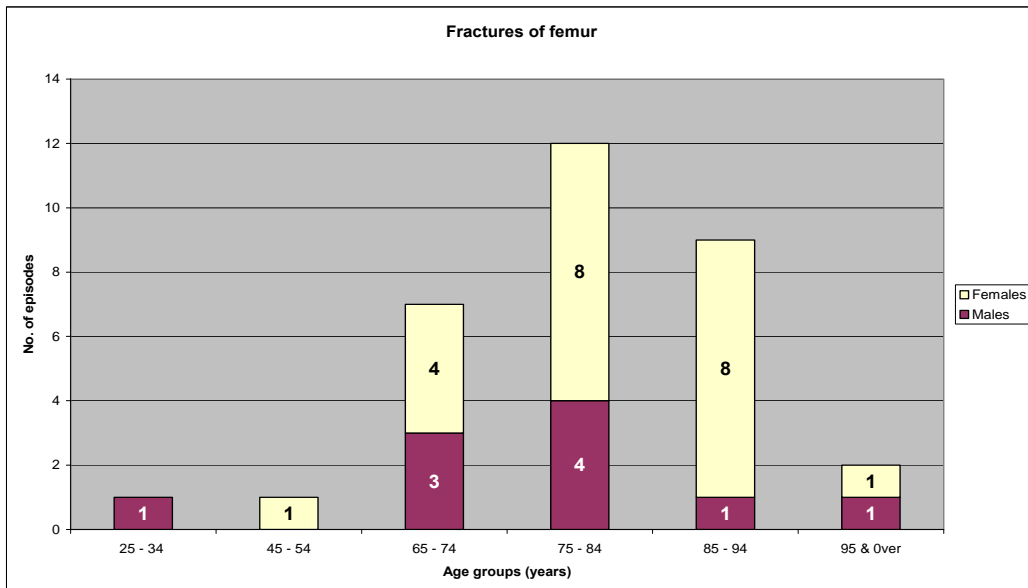


Chart XV: Age group/gender distribution of patients admitted with fracture of femur

The external causes of these episodes of care for fracture of femur are shown in the following pie chart.

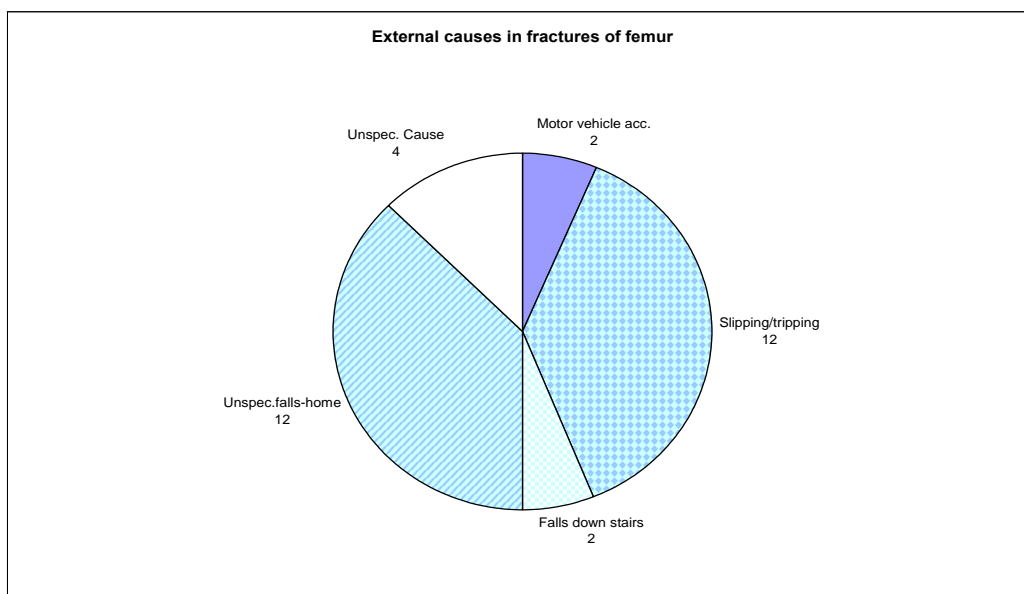


Chart XVI: External causes in admissions for fractures of femur

Inpatients who were aged 65 years or older accounted for 1358 or 31.1% of the total episodes of care and they used up 11191 or 62.8% of the total hospital days. The four most common diagnosis in this age group of patients were acute lower respiratory tract infection – unspecified (119 or 8.7%), cerebrovascular accident – nos (53 or 3.9%), chest pain – unspecified (53 or 3.9%), abdominal pain – unspecified (38 or 2.7%) and fainting/collapse 36 or 2.6%). 42 discharges in this group were for respite care and they used up 1230 hospital days.

Procedures

2122 patients had some form of procedure performed on them during their episodes of care at Gozo General Hospital during 2005. Thus 48.6% of all episodes of care were associated with one or more procedure. 26 episodes had their procedures performed at St. Luke's Hospital, Malta due to lack of facilities at Gozo General Hospital. These procedures included 8 CAT scans and 17 coronary angiograms. In one of the latter cases, an angioplasty procedure (PTCA) was subsequently carried out.

Surgical procedures

At least one surgical procedure was reported in 1939 patients, or 44.4% of all admissions (Chart XVII). 1044 of these patients or 53.8% were admitted as day cases. 60 of the patients with surgical procedures had two reported procedures. Thus a total of 1999 surgical procedures were performed

throughout 2005. This figure includes 18 surgical procedures performed at St. Luke's Hospital and the surgical procedures performed on day cases as well.

The proportion of patients with at least one surgical procedure ranged from 15.2% of patients aged 14 years and under, to 54.1% of patients aged 45 to 64 years. The highest number of surgical procedures was performed on patients in the 45 to 64 age group (616 procedures). At least one surgical procedure was performed on 49.8% of female and 38.8% of male episodes of care (Tables 15 & 16 and Chart XVII).

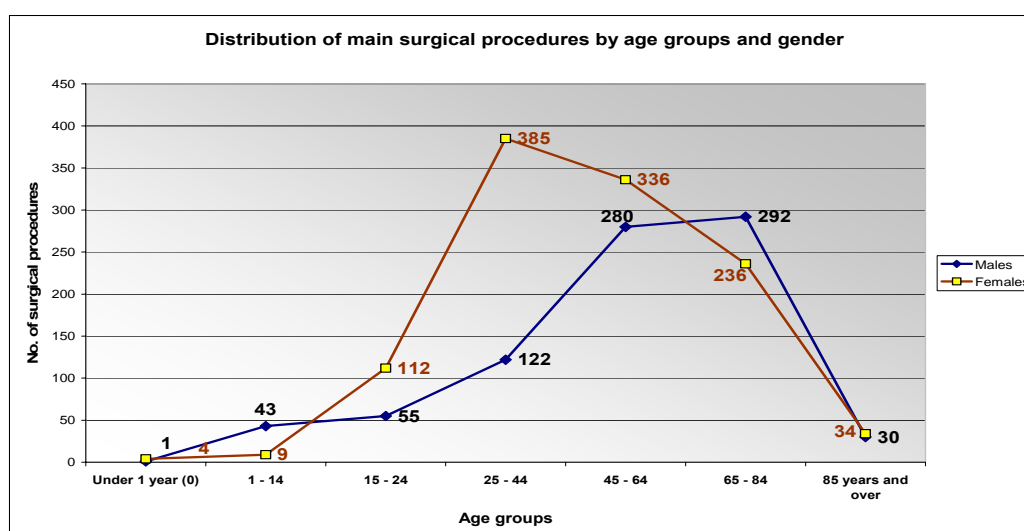


Chart XVII: Numbers of main surgical procedures by age groups and gender

| Characteristics | All discharged patients | Patients without procedures | Patients with procedures | *Patients with surgical procedures |
|------------------------------|-------------------------|-----------------------------|--------------------------|------------------------------------|
| All patients | 4363 | 2241 | 2122 | 1939 |
| By age: | | | | |
| Under 1 year | 27 | 22 | 5 | 5 |
| 1 – 14 years | 278 | 224 | 54 | 52 |
| 15 – 24 years | 373 | 190 | 183 | 167 |
| 25 – 44 years | 825 | 290 | 535 | 507 |
| 45 – 64 years | 1137 | 461 | 676 | 616 |
| 65 – 84 years | 1395 | 800 | 595 | 528 |
| >=85 years & unspecified age | 328 | 254 | 74 | 64 |
| By gender | | | | |
| Male | 2124 | 1232 | 892 | 823 |
| Female | 2239 | 1009 | 1230 | 1116 |

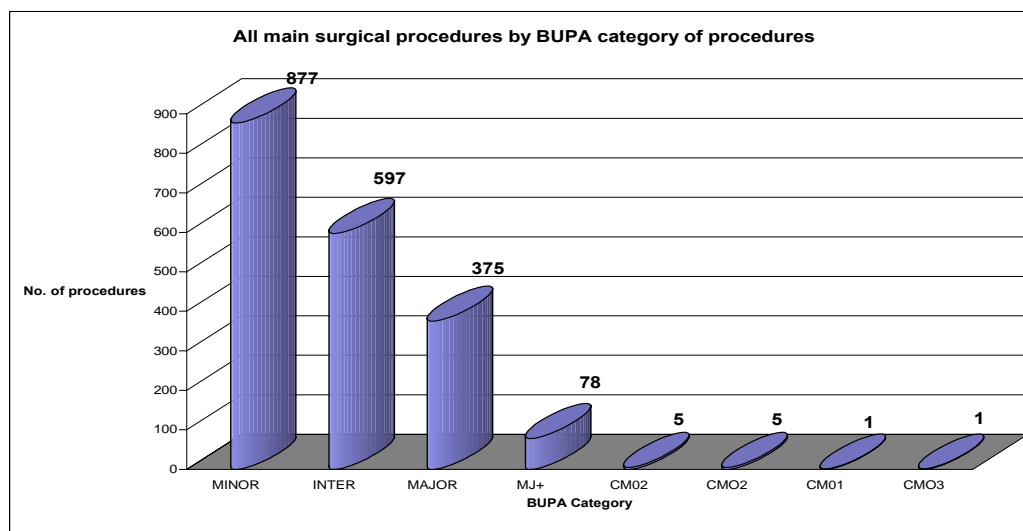
*: Numbers refer to main or first listed operation/procedure.

Table 15: Number of patients discharged from hospital with or without procedures by age groups and gender

| Procedure and ICD-9 CM code | Number performed | % Rate of episodes |
|--|------------------|--------------------|
| All surgical procedures | 1939 | 44.4 |
| Colonoscopy – 45.23 | 229 | 5.2 |
| Excision of lesion of skin/subcutaneous tissue – 86.3 | 146 | 3.3 |
| Diagnostic D&C – 69.09 | 140 | 3.2 |
| Gastroscopy – 44.13 | 132 | 3.0 |
| Cataract extraction – 13.19 | 128 | 2.9 |
| Repair of obstetric laceration – 75.6 | 94 | 2.2 |
| Episiotomy repair – 73.6 | 79 | 1.8 |
| Lower segment Caesarean section – 74.1 | 54 | 1.2 |
| Inguinal hernia repair – unilateral – 53.00 | 45 | 1.0 |
| Total hysterectomy & BSO – 68.4/ 65.61 | 42 | 1.0 |
| Release of carpal tunnel – 04.43 | 34 | 0.8 |
| Proctosigmoidoscopy – 48.23 | 34 | 0.8 |
| Appendicectomy – 47.09 | 33 | 0.8 |
| Evacuation of retained products of conception – 69.02 | 32 | 0.7 |
| Exploratory laparotomy – 54.11 | 30 | 0.7 |
| Oesophagogastroduodenoscopy (OGD) – 45.16 | 28 | 0.6 |
| Open reduction & internal fixation of fracture femur – 79.3(5) | 26 | 0.6 |

Table 16: Number and rate of all listed surgical procedures for discharged patients by the most commonly performed surgical procedures

Main/first listed surgical procedures by category of operation/procedure are depicted in the following chart.



Categories are according to BUPA lists of procedures i.e. minor, intermediate, major, major+, complex major 1 (CMO1), complex major 2 (CMO2), complex major 3 (CMO3).

Chart XVIII: Numbers of main/first listed surgical procedure by BUPA category of procedures

Day case surgical procedures

1044 patients admitted as day cases have a diagnostic or therapeutic main surgical procedure recorded in the database. The most common surgical procedures performed on day cases are shown schematically in chart XIX.

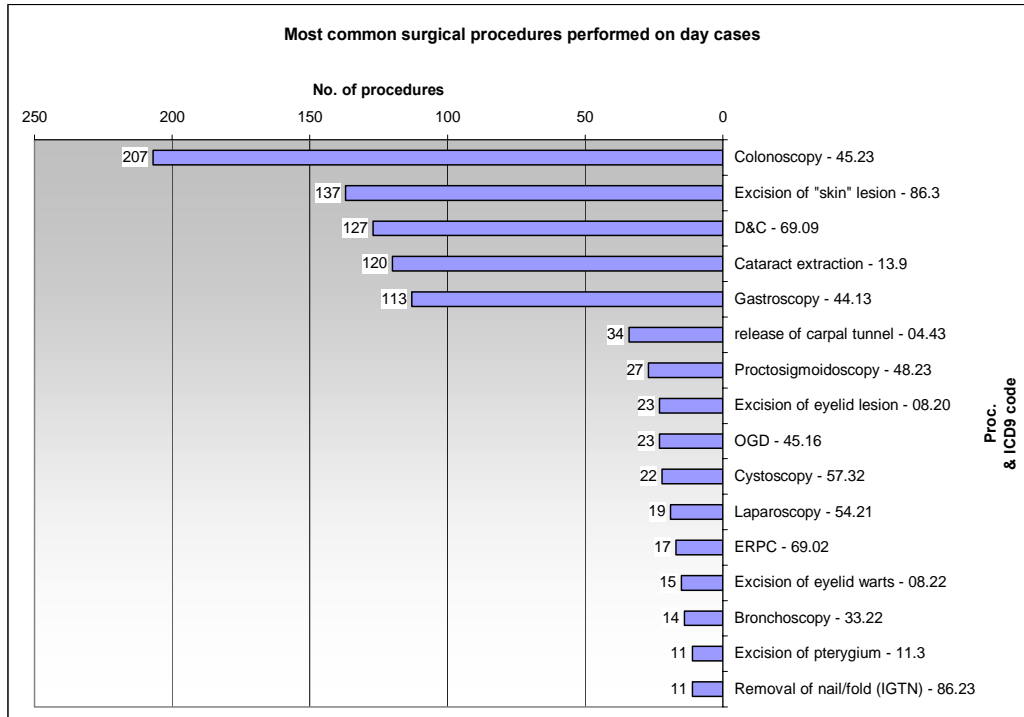


Chart XIX: Most common surgical procedures performed on day cases

The numbers of surgical procedures performed on day cases are shown broken down by the BUPA categories of procedures in chart XX.

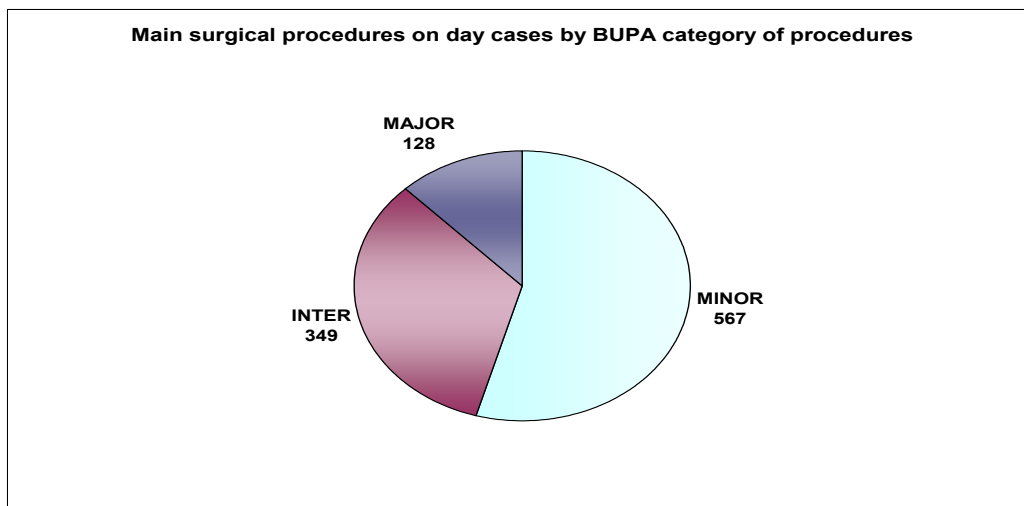


Chart XX: Surgical procedures on day cases by BUPA category of procedures

Other considerations

Three common obstetric procedures i.e. episiotomy and repair, Caesarean section, and repair of obstetric laceration, accounted for 224 or 11.2% of all surgical procedures performed. 54 Caesarean sections were performed; of these 34 were elective procedures and 20 were emergency sections. The rate for Caesarean section per 100 deliveries was 18.1 (%). There were 26 episiotomies and 30 lacerations per 100 vaginal deliveries.

The numbers of obstetric procedures performed are depicted in chart XXI.

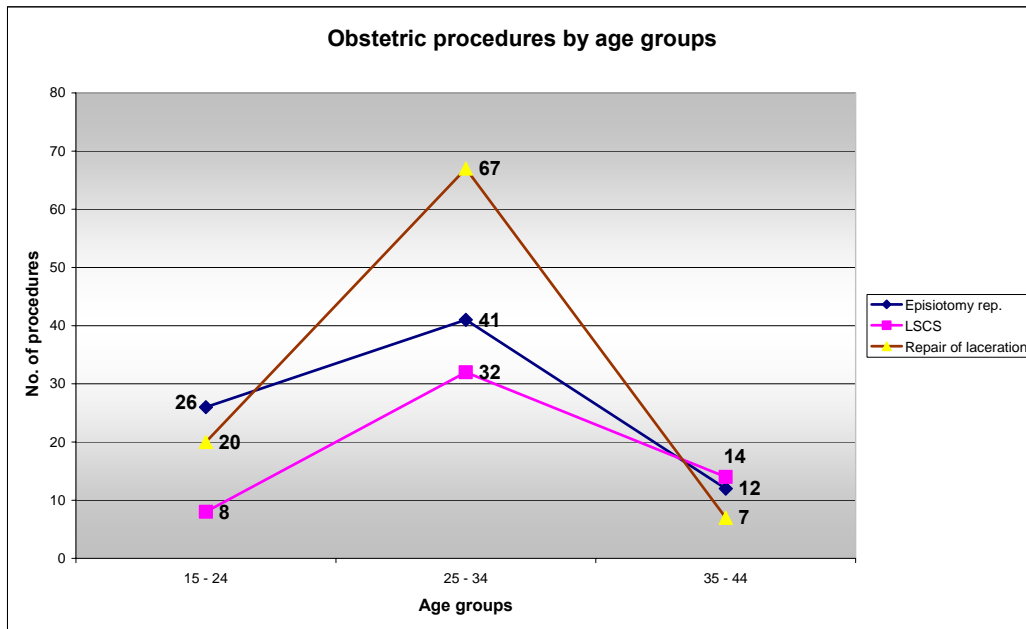


Chart XXI: Surgical Obstetric procedures performed

Surgical procedures on the female genital tract and organs, excluding obstetric procedures, made up 298 or 14.9% of all surgical procedures. These included 30 laparoscopies, 13 procedures on the tubes and ovaries (ovarian cystectomy, oophorectomy, salpingectomy and salpingo-oophorectomy), 222 procedures on the uterus (D&C, ERPC, hysterectomy, hysteroscopy and removal of endometrial polyps), 14 procedures on the cervix (cervical biopsy, cervical polypectomy, conization, and repair of cervical os), and 19 procedures on the vagina and vulva. The latter included anterior and posterior colporrhaphy, pelvic floor repair, and excision of cysts or other lesions on the external genitalia.

Surgical procedures on the digestive system amounted to 783 (39.2%) including diagnostic and screening endoscopies. The latter amounted to a total of 427 procedures. The most common surgical operations performed on the digestive system were hernia repairs, appendectomy and exploratory laparotomy. They accounted for 131 or 6.6% of all surgical procedures performed during 2005.

157 operations on the musculo-skeletal system were recorded. These make up 7.8% of all surgical procedures performed. They included reduction of fractures and fixation (57), 25 knee replacements, 20 amputations, removal of implanted devices (K wires etc.) from bone (13), 10 arthroscopies, and seven partial or total hip replacements.

There were 9 recorded operations on the ear, nose, and throat. These included tonsillectomy, with or without adenoidectomy, and adenoidectomy (5 operations), two procedures involving removal of nasal polyps and two myringotomies with insertion of "grommets".

Non surgical procedures.

A total of 231 patients are recorded as having had a non-surgical procedure during their stay at Gozo General Hospital. 48 of these patients had also an associated surgical procedure performed. 93 of these procedures were performed on day care patients. 85 procedures were carried out on males and 146 were carried out on females.

These episodes include 71 patients admitted for various diagnostic X Ray studies (37) and Ultrasound studies (34), 27 patients admitted for blood transfusion, 56 patients admitted for infusion of therapeutic or prophylactic substances and 17 patients admitted for cardioversion.

Out patients sessions.♦

There were a total of 46986 out patient episodes at Gozo General Hospital throughout 2005. 12519 appointments involved new cases (referrals) and 35215 were follow-up appointments.

| Clinic | New cases | Follow-ups | Total |
|-----------------------------|--------------|--------------|--------------|
| Medical | 773 | 2519 | 3292 |
| Diabetic | 77 | 1520 | 1597 |
| Anti-coagulant clinic (ACC) | 19 | 1377 | 1396 |
| Shedule V Clinic | 1447 | 1591 | 3038 |
| Neurology Clinic | 12 | 23 | 35 |
| Dietician Clinic | 5 | 33 | 38 |
| VCC* | 0 | 122 | 122 |
| Asthma Clinic | 5 | 9 | 14 |
| Pace Maker Clinic | 3 | 257 | 260 |
| Acupuncture Clinic | 32 | 487 | 519 |
| Dental Clinic | 2608 | 3803 | 6411 |
| ENT Clinic | 264 | 96 | 360 |
| Audiogram Clinic | 16 | 49 | 65 |
| Speech therapy Clinic | 107 | 1697 | 1804 |
| Psychiatric Clinic | 44 | 1219 | 1263 |
| Surgical | 781 | 1689 | 2470 |
| Orthopaedics | 662 | 879 | 1541 |
| Dermatology | 443 | 560 | 1003 |
| Antenatal Clinic | 229 | 896 | 1125 |
| Gynaecology Clinic | 491 | 766 | 1257 |
| Paediatric Clinic | 287 | 1035 | 1322 |
| Podology Clinic | 1337 | 5550 | 6887 |
| Radiotherapy Clinic | 61 | 628 | 689 |
| Ophthalmic Clinic | 1007 | 1626 | 2633 |
| Totals | 12519 | 35215 | 46986 |

* Visiting Consultant Clinic. Also used for "cardiac" patients.

Table17: Breakdown of out patients appointments for Gozo General Hospital throughout 2005 by clinic and category of appointment

♦ Data on out patients is not stored in the database on hospital activity. The figures in the out patients' appointments table were supplied by Gozo General Hospital.

Appendix

A hospital is a licensed establishment primarily engaged in providing medical, diagnostic, and treatment services that include physician, nursing, and other health services to inpatients and the specialised accommodation services required by inpatients. Hospitals may also provide outpatient services as a secondary activity.

Hospitalisation studies give a broad picture of the general health and health care treatment of the population. The number of hospital discharges is the most commonly used measure of the utilisation of hospital services. Hospital discharges, rather than admissions, are used because hospital abstracts for inpatient care are based on information gathered at the time of discharge i.e. at the end of an episode of care.

A patient is a person who is formally admitted for inpatient care in a hospital.

Completed hospital episodes refer to a count of the number of NHIS records submitted by participating hospitals that relate to episodes of hospital care that ended during the current year.

Inpatient care beds accommodate patients who are formally admitted (or 'hospitalised') to an institution for treatment and/or care and who stay for a minimum of one night in the hospital or other institution providing inpatient care.

A bed-day is a day during which a person is confined to a bed and in which the patient stays overnight in a hospital.

One-day cases (day cases) are defined as patients admitted to and discharged from inpatient treatment on the same calendar day. Day cases are excluded from inclusion in counts of inpatient care beds and bed days as both of these incorporate a patient who stays overnight (even if it is for one night) in hospital in their definition.

Calculation of percentage bed occupancy rates requires dividing the number of bed days by the product of days of the year or part thereof and the number of available beds (i.e. $(\text{Bed days}) / [365 * (\text{beds})]$ multiplied by a hundred).

The average turnover is the mean number of patients that have occupied any one particular hospital bed during the period under consideration. It is usually calculated by dividing the total number of discharges by the average number of available beds.

Discharge refers to the formal release of a patient by a hospital. It implies the termination of a period of hospitalisation or episode of care by death, or by disposition to place of residence, residential or nursing home, or another hospital. The terms "discharges" or "discharged patients" may be used synonymously.

Discharge rates are expressed by the number of discharges per 100,000 population.

A new-born baby is a patient admitted by birth to a hospital.

Average length of stay is calculated by dividing the number bed days by the number of separations (discharges including deaths) during the year. The latter will include day cases. The calculated ALOS may thus be biased depending on the relative proportion of day cases.

Care type. This may be:

Acute care:

The clinical intent or treatment goal is to manage labour (obstetric), cure illness or provide definitive treatment of injury, perform surgery, relieve symptoms of illness or injury (excluding palliative care), reduce severity of an illness or injury, protect against exacerbation and/or complication of an illness and/or injury which could threaten life or normal function, perform diagnostic or therapeutic procedures

Rehabilitative care:

This is care in which the clinical intent or treatment goal is to improve the functional status of a patient with an impairment, disability or handicap. It is usually evidenced by a multi-disciplinary rehabilitation plan comprising negotiated goals and indicative time frames which are evaluated by a periodic assessment using a recognised functional assessment measure.

Palliative care:

This is care in which the clinical intent or treatment goal is primarily quality of life for a patient with an active, progressive disease with little or no prospect of cure. It is usually evidenced by an interdisciplinary assessment and/or management of the physical, psychological, emotional and spiritual needs of the patient; and a grief and bereavement support service for the patient and their carers/family.

Geriatric evaluation and management:

This is care in which the clinical intent or treatment goal is to maximise health status and/or optimise the living arrangements for a patient with multi-dimensional medical conditions associated with disabilities and psychosocial problems, who is usually (but not always) an older patient.

Psychogeriatric care:

This is care in which the clinical intent or treatment goal is improvement in health, modification of symptoms and enhancement in function, behaviour and/or quality of life for a patient with an age-related organic brain impairment

with significant behavioural or late onset psychiatric disturbance or a physical condition accompanied by severe psychiatric or behavioural disturbance.

Mental health care (Psychiatric care)

This is care restricted to admitted patients receiving care in psychiatric hospitals or in designated psychiatric units in acute hospitals.

Maintenance care

This is care in which the clinical intent or treatment goal is prevention of deterioration in the functional and current health status of a patient with a disability or severe level of functional impairment. It involves care when it has been established that the patient does not require further complex assessment or stabilisation, and requires care over an indefinite period. This care includes that provided to a patient who would normally receive care in another setting e.g. at home, or in a residential aged care service, by a relative or carer, that is unavailable in the short term. Many of the “social” cases in local state hospitals fall into this category.

New-born care

This is initiated when the patient is born in hospital or is nine days old or less at the time of admission. New-born care continues until the care type changes or the patient is discharged.

Persons with mental illness may receive any one of the care types (except new-born care). Classification then depends on the principal clinical intent of the care received.

A procedure is a surgical or non surgical process, diagnostic procedure, or special treatment reported on the medical record of a patient.

Discharges with procedures refer to the number of patients discharged from hospital during the period of the report who underwent at least one procedure during their hospitalisation.

All listed procedures refer to the number of procedures listed on the patient's medical record sheet. Non-surgical procedures are usually not considered to be surgical operations. They include radiography, radiotherapy, physical medicine and rehabilitation procedures. Surgical operations include all the procedures, which are not listed with “non-surgical procedures”. Some centres do not consider diagnostic endoscopies as surgical operations. This is not the case in this report.