## Business case for One-stop Transnasal Oesophagoscope Service Adoption

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May 15, 2021

## Abstract

Keypoints: \* Implementing a one-stop Transnasal oesophagoscopy (TNO) service will benefit patients, clinicians as well as the NHS Trusts. \* TNO is safe, well-tolerated and improves diagnostic and therapeutic precision in the upper aerodigestive tract and oesophagus. \* The one-stop TNO service has clear financial benefits. \* The one-stop TNO service is a streamlined pathway which improves patient care and experience. \* Both the clinical and financial risk of introducing the service is low.

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For TNO Assessment	<ul> <li>Transnasal oesophagoscope – 1 per patient</li> <li>Videostack system</li> <li>5% lidocaine hydrochloride + 0.5% phenylephrine hydrochloride – 2 per patient</li> <li>Instillagel – 2% Lidocaine gel – 1 per patient</li> <li>Xylocaine – 10% Lidocaine – 1 per patient</li> <li>Pack of Gauze</li> <li>Personal Protection Equipment</li> </ul>
Additional For Vocal Cord Injection Procedures	<ul> <li>Voice injection (Botox, Radiesse, Hyaluronic acid, Depomedrone steroid) – 2 per patient</li> <li>Rigid injection needle with support cannula – 1 per patient</li> <li>Hypodermic needle size 24G x 1.5" – 1 per patient</li> <li>1 cup non-sterile hot water</li> <li>MADgic Atomisation Device (Teleflex, USA) – 1 per patient</li> </ul>
Additional For Biopsy Procedures	<ul> <li>Specimen pot</li> <li>Flexible forceps</li> <li>MADgic Atomisation Device (Teleflex, USA) – 1 per patient</li> </ul>
Additional For Balloon Dilation Procedures	<ul> <li>Cook medical balloon – 3 selection of sizes (sizes 20, 18, 16) per patient</li> <li>Cook medical syringe 60mls – 1 per patient</li> </ul>
Additional For Blue/KTP Fibre or CO <sub>2</sub> Laser Procedures	<ul> <li>Blue laser</li> <li>Specimen pot</li> <li>Flexible forceps</li> <li>Additional personal protection equipment – laser eyewear, door signs and locks on doors</li> </ul>

 Table 1: Our equipment checklist for TNO procedures

Clinicians	NHS Trusts	Patients
Comprehensive ENT examination from nasal cavity to GOJ	Switch from in-patient setting to out-patient one- stop clinic setting thereby reducing the patients' length of hospital stay	Reduces the time to diagnosis and treatment improving continuity of patient care and experience
Digital High-Resolution imaging increasing diagnostic yield and biopsy precision	Reduces waiting lists in day surgery, main theatre, barium swallows and radiology where these spaces can be assigned to other uses	Early and more accurate diagnosis means better outcomes
Eliminates risks associated with GA, particularly valuable in high risk patients	Shorter procedure time and more cost beneficial to the Trust	Immediate results remove stress of waiting and the need for additional travel for result clinics
Equipment is user friendly	Eliminates need for bed spaces	Out-patient setting less daunting to patients than theatre
Can be performed in outpatient setting so there is no need for theatre preparations	Saving theatre resources for other procedures	Avoidance of GA often means less risks and quicker recovery
	Reduce need for outpatient results clinic visits due to instant results	Reduces time spent in the hospital, minimising risk of hospital acquired infection

 Table 2: Summary of the key benefits of a one-stop TNO service to clinicians, NHS trusts and patients [3-5]

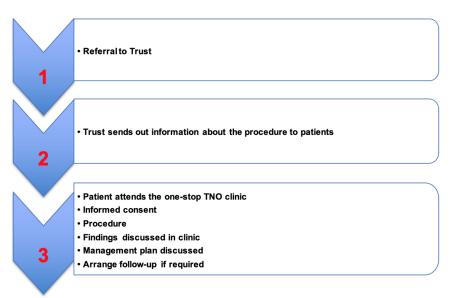


Figure 1: One-stop Transnasal Oesophagoscopy Service Pathway



Figure 2: Example of an outpatient set up