Editorial: Improving the delivery of ambulatory surgery

David Bunting

Ambulatory surgery continues to evolve through innovation, thoughtful service redesign and the commitment of multidisciplinary teams. This issue of Ambulatory Surgery highlights how relatively straightforward changes to clinical pathways, staff training and perioperative practice can deliver meaningful improvements in patient care and service efficiency.

Our first two papers explore the development of regional anaesthesia block rooms. The introduction of a streamlined, questionnaire-based pre-operative assessment pathway demonstrates the potential to release valuable clinical capacity while maintaining access for older patients and those with significant comorbidities. Complementing this, a structured competency framework for nursing staff highlights the importance of appropriate training, simulation and clearly defined responsibilities in delivering safe and sustainable services.

Our third paper examines same-day surgical cancellations, identifying opportunities to improve patient preparation, pre-operative assessment and operational planning. Cancellations remain a source of considerable frustration for patients and healthcare teams alike, and understanding their causes is an essential first step towards reducing avoidable disruption.

Finally, our international contribution from Barcelona explores ambulatory transperineal MRI–ultrasound fusion prostate biopsy under general anaesthesia with spontaneous ventilation. The findings add to the growing evidence that carefully designed ambulatory pathways can accommodate increasingly complex procedures while maintaining patient comfort and safety.

Collectively, these papers reinforce an important message: successful ambulatory surgery depends not simply on performing more procedures as day cases, but on designing services around patients, supporting skilled teams and continually evaluating outcomes.

I thank all our authors and reviewers for their contributions and encourage readers to consider how these findings might inform service development in their own institutions.

David Bunting
Editor-in-Chief