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National Multicentric Derivation and Validation of the SAMPE Model – a Mortality Risk Stratification Model within 30 days postoperatively

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Cepar
CUIDADOS ESTENDIDOS AO
PACIENTE CIRÚRGICO DE ALTO RISCO
48h
HOSPITAL DE CLÍNICAS
Projeto de melhoria

Introduction

Surgical care is essential for the proper management of various clinical conditions. It is known that the interaction between **surgical-anesthetic interventions** and the **patients' clinical condition** can lead to unfavorable outcomes, especially in major procedures.

In order to identify patients at **highest risk** of complications and thus adopt strategies that improve the care provided, several models of surgical risk stratification have been developed. Ideally, these should be **simple, reproducible and accurate**. Unfortunately, none of the best-known risk stratification instruments had their validity tested for the Brazilian population.

SAMPE model

Age	ASA classification
Size	Nature of surgery
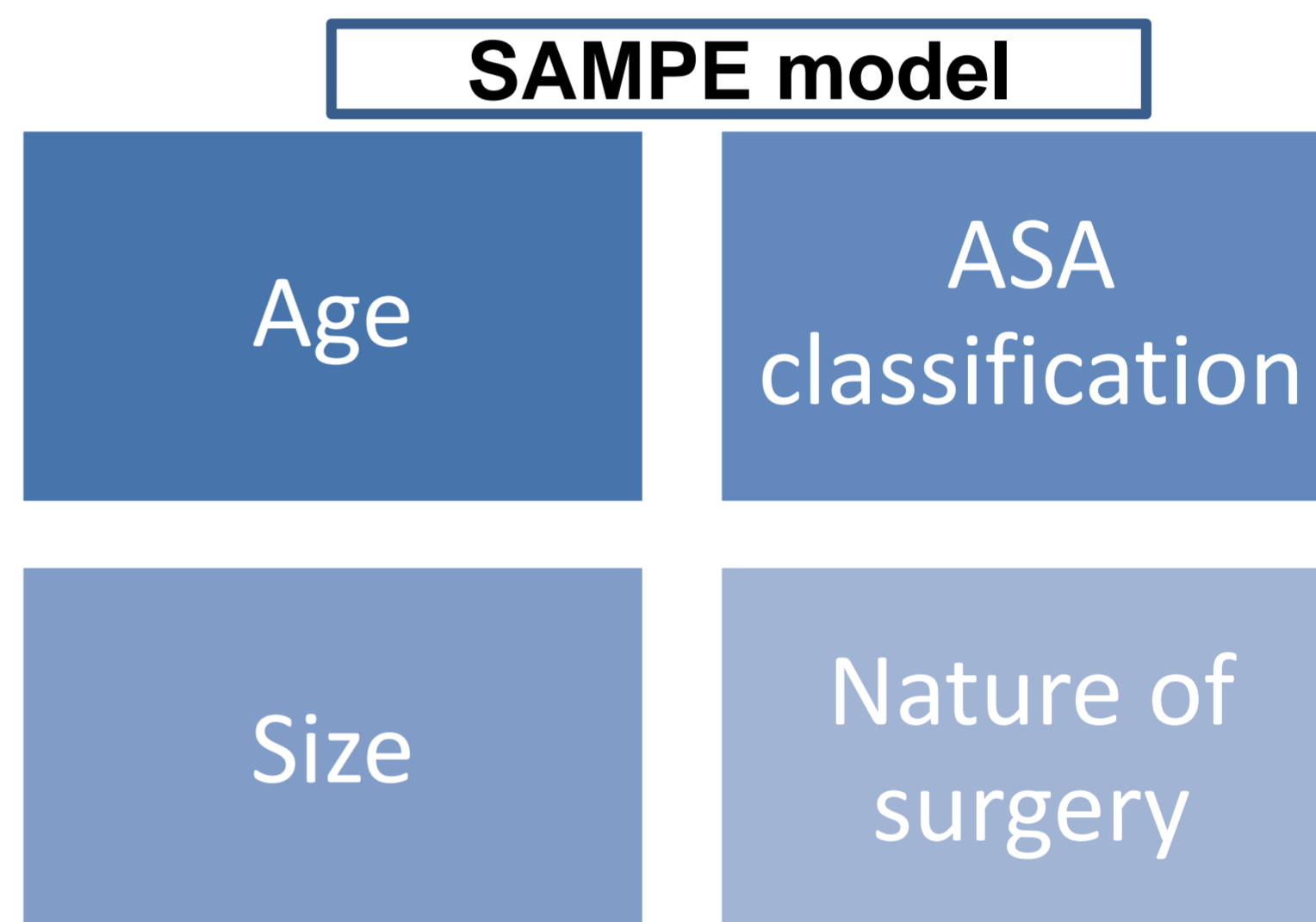
Objective

➤ To build and validate a national-based model of postoperative death probability within 30 days with based on the SAMPE Preoperative Risk Model.
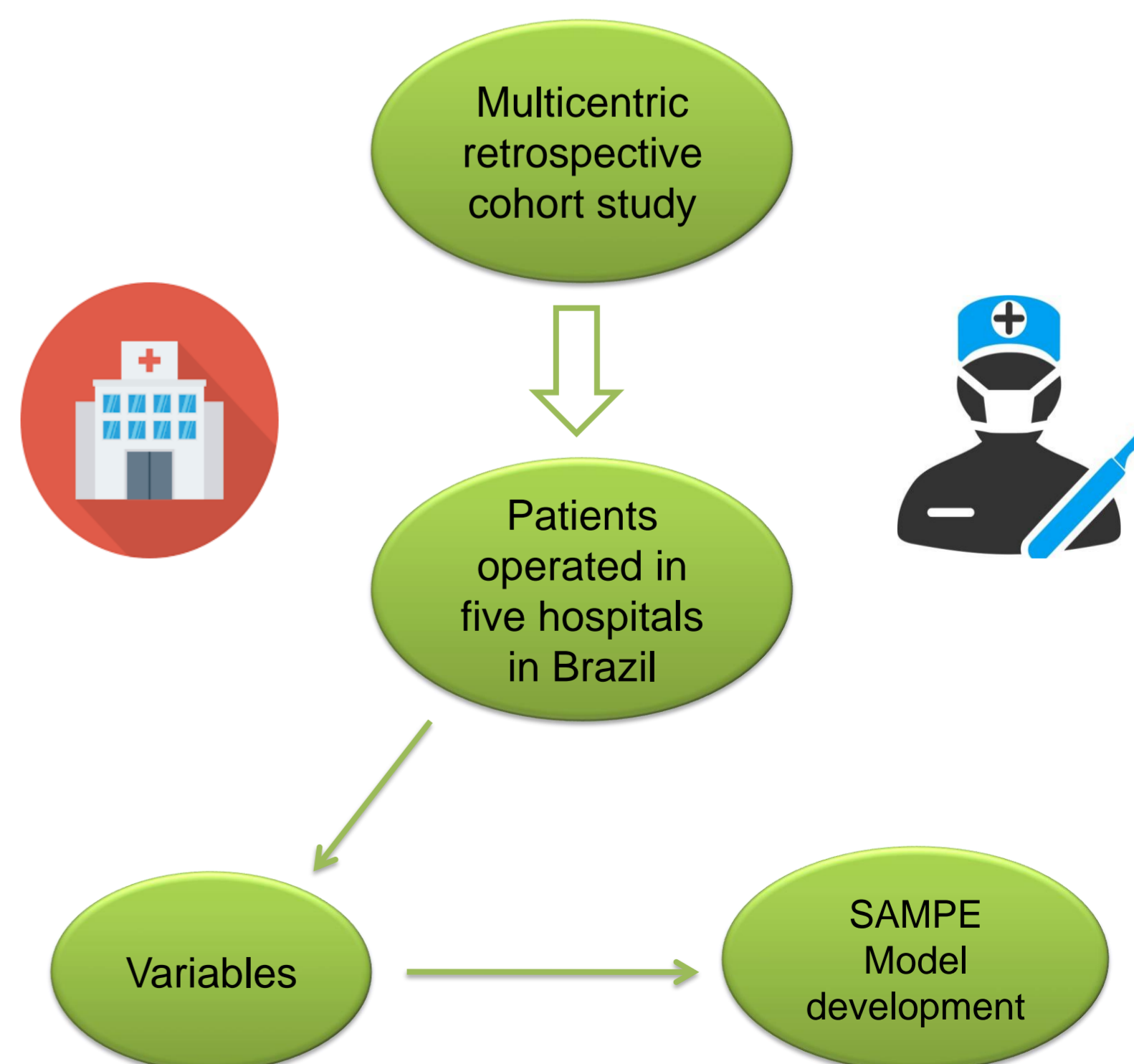
➤ To develop an app for smartphones that allows preoperative risk stratification by the new SAMPE Model.

Expected Results

➤ New SAMPE model will present **discriminative capacity similar** to that of other classically used scores validated in the **prediction of in-hospital death within 30 days**, with the differential of having *patients operated at national hospitals as a sample*.

➤ The mobile application to be developed will provide a **practical and easy-to-use** tool for the identification of patients at greater risk of death postoperatively to the health professionals involved in perioperative care.

Materials and methods

Multicentric retrospective cohort study

Patients operated in five hospitals in Brazil

Variables → SAMPE Model development

The primary outcome will be mortality in 30 days