

Day-case TURBT is not only feasible but safe and efficient.

Nearly half of patients achieved same-day discharge after TURBT, continence preserved in over 90%.

### Hypothesis:

Day-case Transurethral Resection of Bladder Tumours (TURBT) can be safely implemented without compromising postoperative continence, bladder function, or patient outcomes, and may serve as the default approach unless contraindicated by specific patient or tumour factors.

### Aim of the Study:

The primary aim of this study is to evaluate the feasibility and outcomes of day-case TURBT, with a specific focus on postoperative continence, bladder function, and patient recovery. Additionally, the study aims to compare our institution's day-case rates with national benchmarks and identify areas for improvement in patient selection, documentation, and discharge planning to optimise day-case TURBT practices.

### RESULTS

Of 59 patients undergoing elective TURBT, 47% were discharged on the same day, while 38% stayed for one day, 9% for two days, and 6% for over two days. The overall admission rate was 55%, with 44% of admission decisions made preoperatively and 20% intraoperatively. Tumor size was undocumented in 42% of cases.

