**EFFECT OF DAY OF PROCEDURE ON OUTCOMES OF TRANSCATHETER AORTIC VALVE IMPLANTATION IN THE UNITED STATES: ANALYSIS FROM LARGE NATIONAL REGISTRY**

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*Objective:* There is a need to decrease cost of Transcatheter aortic valve implantations (TAVIs) without affecting clinical outcomes.

*Background:* With many centers being split between performing elective TAVIs on the day of admission i.e. Day 0, or on the next day of admission i.e. Day 1, we proposed to investigate if there is an economic advantage to either approach.

*Methods:* We performed a retrospective cohort study, using Nationwide Inpatient Sample database of 2012 and identified subjects undergoing endovascular TAVIs using the ICD-9-CM procedure code of 35.05. The cohort was divided based on the day of the TAVI i.e. Day 0 or 1. The cost of the hospitalization was the primary outcome; with in-hospital mortality and procedural complications as the secondary outcomes. We identified a total of 843 TAVIs. Propensity matched models were created.

*Results:* The mean age was 82 years; 54% were males and 81% were whites. The mean cost of hospitalization was $54544±963. In propensity matched dataset, TAVIs performed on Day 0 were associated with a lower cost ($51126 ± 1184 Vs $57703 ± 1508, p<0.0001) and length of stay (Mean Days, SE: 5.87 ± 0.25 Vs 7.20 ± 0.29, p<0.001) compared to Day 1. In-hospital mortality plus complication rates were relatively similar with no difference between Day 0 and 1 (31.5% Vs 34.1%, p=0.47, respectively).

*Conclusions:* Endovascular TAVIs performed on the same day of admission are associated with lower hospitalization costs and length of stay, and similar mortality and complication rates compared to those performed on the next day of admission.

**Figures:**

