Background: Respiratory Syncytial Virus (RSV) infection confers higher morbidity and mortality post cardiac surgery.

Objective: We study the role of routine rapid RSV screening in patients going for elective cardiac procedure or surgery.

Methodology: A prospective study of all patients aged less than 2 years, admitted electively from March 2008 till March 2009 was undertaken. RSV screening was done using rapid chromatography and the course of the patient was followed up to assess the length of stay in the ICU, in the hospital and for death. The children were divided into RSV positive and RSV negative.

Results: A total of 130 patients were recruited, of whom 115 were clinically fit to proceed for surgery or intervention. 15.7% of the patients admitted for surgery/procedure were noted to be positive for RSV. Being oxygen / ventilator dependent, having pulmonary hypertension, heart failure and cyanosis did not increase the yield of RSV positivity. There was no statistical difference in the length of hospital stay and ICU stay except patients with heart failure (p=0.044). RSV positive group did not demonstrate increased risk of perioperative mortality (Gp A 10.3% vs Gp B 11.0%).

Conclusion: Routine RSV screening was not indicated for patients undergoing for elective cardiac surgery and procedure.