



INCORRECT COUNT INTRA-OPERATIVE RADIOGRAPHIC PROTOCOL QUALITY IMPROVEMENT

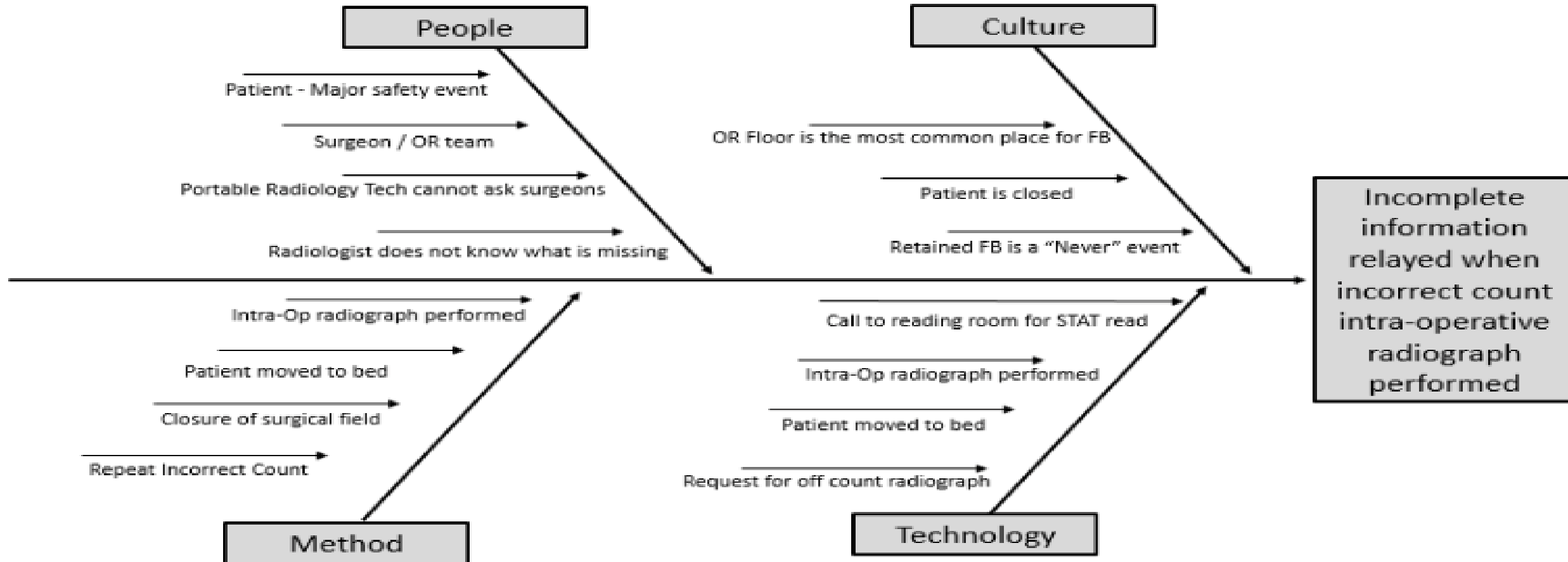
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PURPOSE

- A retained surgical foreign body (FB) is considered a "never event" by the Joint Commission and Department of Health and Human Services (HHS).
- This project aims to improve patient safety by reducing the chance of this "never event".

PROBLEM: GENBA

Process evaluation via Fishbone diagram



PROBLEM

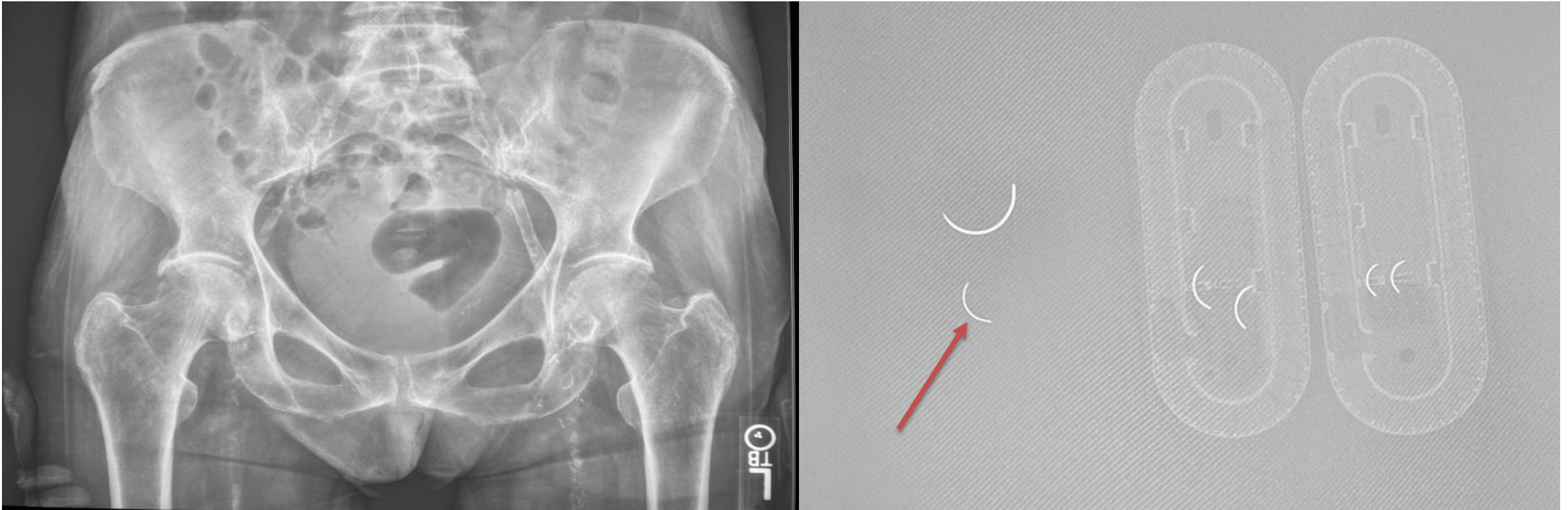
Inadequate communication between surgery and radiology regarding the nature of the missing item could lead to misdiagnosis or misinterpretation of a retained FB.

METHODS / MATERIALS

- A multi-disciplinary approach
- Visual representation of FB
- Policy change approved by perioperative executive committee
- Survey of radiologists' confidence
 - 1-5 rating
 - Timed completion

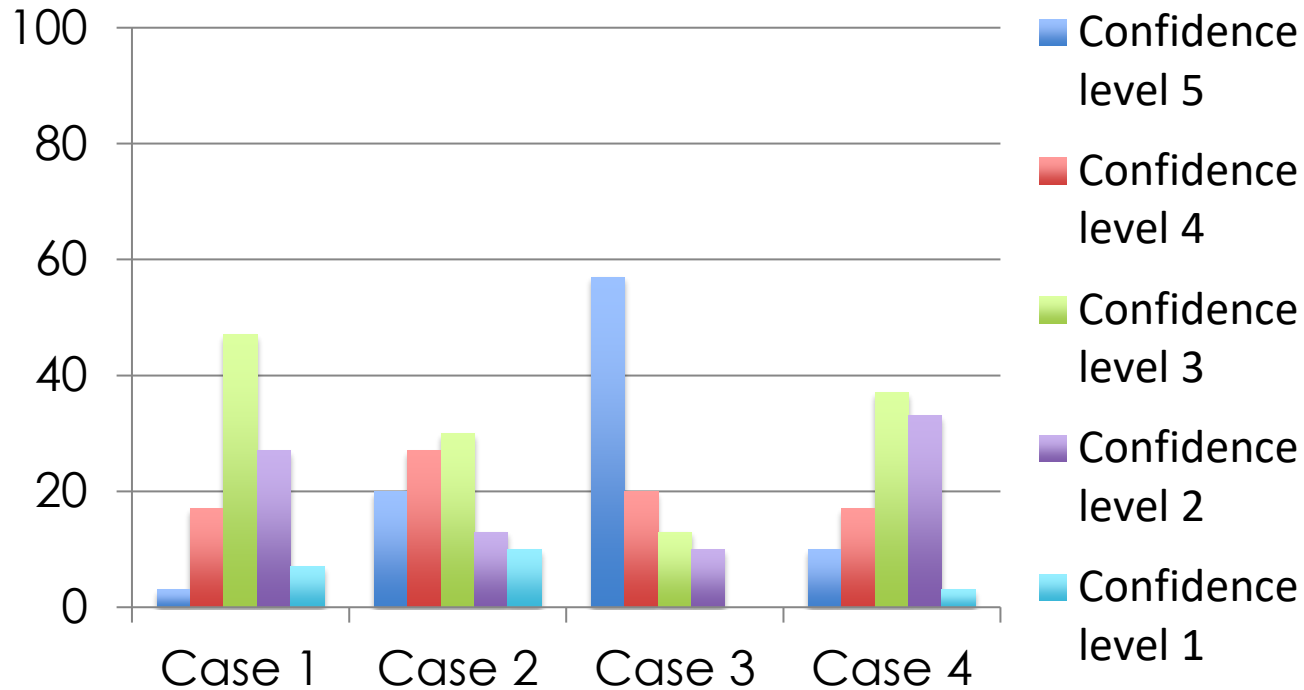
METHODS / MATERIALS - CONTINUED

- Survey with radiographic example

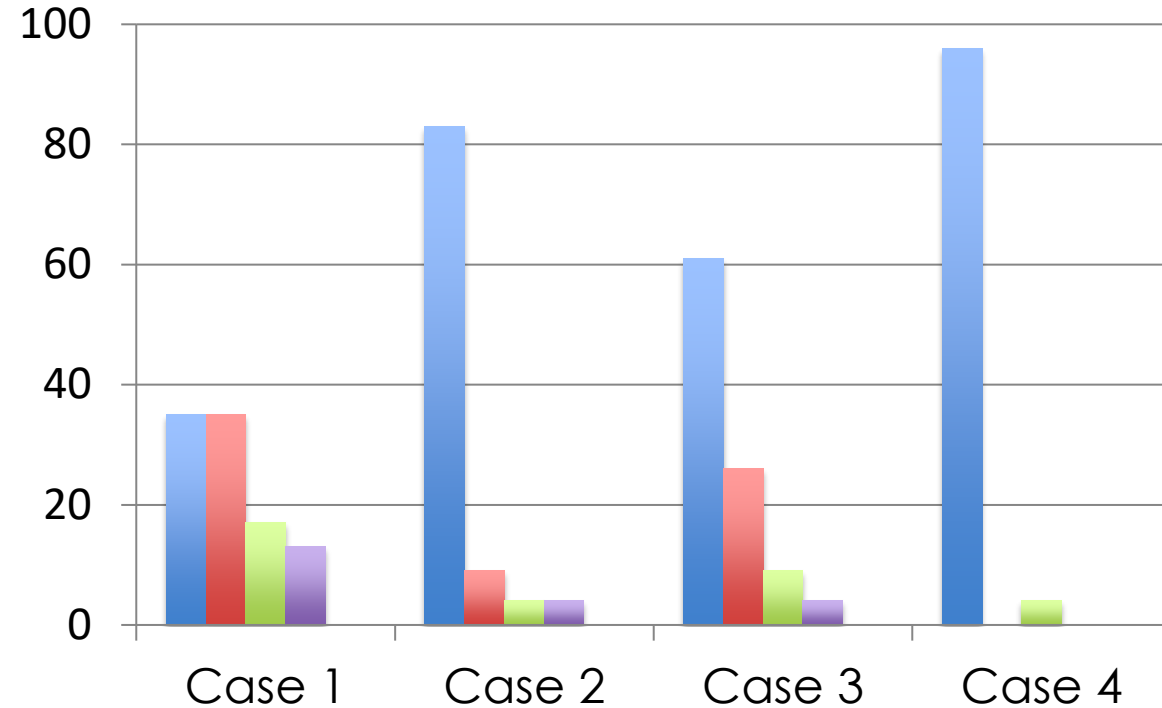


SURVEY RESULTS

Survey 1: Intra-Operative radiographs without radiographic examples



Survey 2: Intra-Operative radiographs with radiographic examples



RESULTS

- Similar rates of the accuracy of FB detection
- **Confidence rating of 4 or 5 increased from 42% to 85%** with radiographic examples
- **Time to survey completion decreased by an average of 25%** with radiographic examples

CONCLUSION

- New Incorrect Count Intraoperative Radiographic Policy:
 - Increase radiologists' confidence in diagnosis or exclusion of FB material
 - Decrease misinterpretation of retained FB and improve patient safety
 - May decrease time to final read

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- Feldman DL. Prevention of retained surgical items. Mt Sinai J Med. 2011 Nov-Dec;78(6):865-71. doi: 10.1002/msj.20299. PMID: 22069210.
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- Weprin S. et al. Risk factors and preventive strategies for unintentionally retained surgical sharps: a systematic review. Patient Saf Surg. 2021 Jul 12;15(1):24. doi: 10.1186/s13037-021-00297-3. PMID: 34253246; PMCID: PMC8276389