

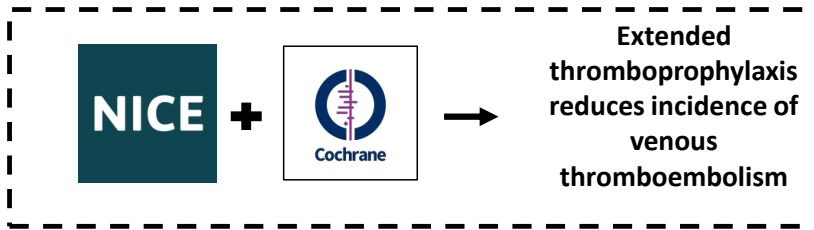
Improving documentation of extended thromboprophylaxis in operation notes following new departmental thromboprophylaxis policy for colorectal resection procedures



J. Shepherd, G. Ramsay

Department of General Surgery, Aberdeen Royal Infirmary, Aberdeen

Background:



➔ **RCS Guidelines** → Operation notes should include thromboprophylaxis instructions

➔ **Departmental Issue Highlighted:** Lack of communication of whether extended thromboprophylaxis indicated following policy implementation

Previous Practice
Thromboprophylaxis as INPATIENT ONLY

New Policy
"All patients who undergo colorectal resections should be considered for extended thromboprophylaxis of 28 days."

Aims:

- To assess operation note documentation of whether extended thromboprophylaxis is indicated.
- To implement measures to improve documentation.

Methods: Data Collection: 2-week period, all elective colorectal resections

Cycle 1 - (Jun 2020)



Cycle 2 - (Sep 2020)

Results:

Cycle 1 – 15%



Cycle 2 – 80%

The Intervention:

➔ Departmental Education

➔ Updated operation note template

References

1. Felder S, Rasmussen MS, King R, Sklow B, Kwaan M, Madoff R, et al. Prolonged thromboprophylaxis with low molecular weight heparin for abdominal or pelvic surgery. *Cochrane Database Syst Rev* [Internet]. 2019 Mar 27 [cited 2020 Oct 14];(3).
2. National Guideline Centre. Venous thromboembolism in over 16s: Reducing the risk of hospital-acquired deep vein thrombosis or pulmonary embolism. *Natl Inst Heal Care Excell*. 2018;2(March).
3. Practice G. Good surgical practice. *Oxford Handb Clin Surg*. 2013;(212808):1–22.

Fig 1. Percentage of operation notes which specified thromboprophylaxis duration.

Conclusions:

- Significant improvement is demonstrated in documentation following trainee education and implementation of updated operation note templates.
- Improved communication with team members ensures patients receive extended thromboprophylaxis if suitable, in keeping with guidelines.