

APPENDIX A - ABBREVIATIONS

A&E	Accident and Emergency	SVT	Supraventricular tachycardia
ACT	Activated clotting time	VT	Ventricular tachycardia
AVCx	Atrioventricular circumflex (coronary artery)		
BCIS	British Cardiovascular Intervention Society		
CABG	Coronary artery bypass grafts		
CCU	Coronary care unit		
CPR	Cardiopulmonary resuscitation		
CVVH	Continuous venovenous haemofiltration		
DGH	District general hospital		
DVT	Deep vein thrombosis		
ECG	Electrocardiogram		
GI	Gastrointestinal		
HDU	High dependency unit		
IABP	Intra-aortic balloon pump		
ICU	Intensive care unit		
IHD	Ischaemic heart disease		
IV	Intravenous		
LAD	Left anterior descending (coronary artery)		
LIMA	Left internal mammary artery		
LMS	Left main stem (coronary artery)		
LV	Left ventricular		
MI	Myocardial infarction		
OM	Obtuse marginal (coronary artery)		
PTCA	Percutaneous transluminal coronary angioplasty		
RCA	Right coronary artery		
SpR	Specialist registrar		
SV	Saphenous vein		

APPENDIX B - NCEPOD

CORPORATE STRUCTURE

The National Confidential Enquiry into Perioperative Deaths (NCEPOD) is an independent body to which a corporate commitment has been made by the Associations, Colleges and Faculties related to its areas of activity. Each of these bodies nominates members of the Steering Group.

Steering Group

(as at 1 October 2000)

Chairman

Mr John Ll Williams

Members

Mrs M Beck (Royal College of Ophthalmologists)

Dr J F Dyet (Royal College of Radiologists)

Dr H H Gray (Royal College of Physicians of London)

Dr P Kishore (Faculty of Public Health Medicine)

Mr G T Layer (Association of Surgeons of Great Britain and Ireland)

Professor V J Lund (Royal College of Surgeons of England)

Dr J M Millar (Royal College of Anaesthetists)

Dr A J Mortimer (Royal College of Anaesthetists)

Professor J H Shepherd (Royal College of Obstetricians and Gynaecologists)

Dr P J Simpson (Royal College of Anaesthetists)

Mr M F Sullivan (Royal College of Surgeons of England)

Professor P G Toner (Royal College of Pathologists)

Professor T Treasure (Royal College of Surgeons of England)

Dr D J Wilkinson (Association of Anaesthetists of Great Britain and Ireland)

Mr J Ll Williams (Faculty of Dental Surgery, Royal College of Surgeons of England)

Observers

Mr P Milligan (Institute of Health Services Management)

Dr P A Knapman (Coroners' Society of England and Wales)

NCEPOD is a company limited by guarantee, and a registered charity, managed by Trustees.

Trustees

Chairman Mr J Ll Williams

Treasurer Dr J N Lunn
Dr J Lumley
Dr P J Simpson
Mr M F Sullivan

Clinical Coordinators

The Steering Group appoint the Principal Clinical Coordinators for a defined tenure. The Principal Clinical Coordinators lead the review of the data relating to the annual sample, advise the Steering Group and write the reports. They may also from time to time appoint Clinical Coordinators, who must be engaged in active academic/clinical practice (in the NHS) during the full term of office.

Principal Clinical Coordinators

Anaesthesia Dr G S Ingram
Surgery Mr R W Hoile

Clinical Coordinators

Anaesthesia Dr A J G Gray
Dr K M Sherry

Surgery Mr K G Callum
Mr I C Martin

Funding

The total annual cost of NCEPOD is approximately £500,000 (1999/2000). We are pleased to acknowledge the support of the following, who contributed to funding the Enquiry in 1999/2000.

National Institute for Clinical Excellence
Welsh Office
Health and Social Services Executive (Northern Ireland)
States of Guernsey Board of Health
States of Jersey
Department of Health and Social Security, Isle of Man Government
Aspen Healthcare
BMI Healthcare
BUPA
Community Hospitals Group
Nuffield Hospitals
PPP/Columbia Healthcare
Benenden Hospital
King Edward VII Hospital, Midhurst
King Edward VII's Hospital for Officers, London
St Martin's Hospitals
The Heart Hospital
The London Clinic

This funding covers the total cost of the Enquiry, including administrative salaries and reimbursements for Clinical Coordinators, office accommodation charges, computer and other equipment as well as travelling and other expenses for the Coordinators, Steering Group and advisory groups.

APPENDIX C - DATA COLLECTION AND REVIEW METHODS

The National Confidential Enquiry into Perioperative Deaths (NCEPOD) reviews clinical practice and aims to identify remediable factors in the practice of anaesthesia, all types of surgery and other invasive procedures. The Enquiry considers the quality of the delivery of care and not specifically causation of death. The commentary in the reports is based on peer review of the data, questionnaires and notes submitted; it is not a research study based on differences against a control population, and does not attempt to produce any kind of comparison between clinicians or hospitals.

The concept of a one-year study reviewing percutaneous transluminal coronary angioplasty (PTCA) represented a unique opportunity for collaboration between NCEPOD and the Royal College of Physicians. The study was also one of the first by NCEPOD to specifically collect denominator data on the total number of procedures performed.

The data collection and review methods are described below.

Scope

All National Health Service hospitals undertaking PTCA in England, Scotland, Wales and Northern Ireland, together with relevant hospitals in the independent sector, were invited to participate in the study.

The period for which data was collected ran from 1 September 1998 to 31 August 1999 and participation was voluntary, being before the introduction of clinical governance and any requirement to take part in this type of Enquiry.

Data collection and review

All relevant hospitals were invited, via a local member of the British Cardiovascular Intervention Society (BCIS), to participate in the study and to nominate a suitable person to take responsibility for submission of the necessary data. The names of those who agreed to undertake this task are shown in Appendix D, and were predominantly consultant cardiologists.

Participating hospitals were asked to submit aggregated data on the total number of PTCA procedures on a monthly basis. In addition, information was requested on any patient who died in hospital within 30 days of the procedure. If hospitals were aware of deaths occurring at home, they were invited to report these as well.

Review of deaths

For every case where NCEPOD was informed of a death within 30 days of the procedure, a questionnaire was sent to the relevant consultant cardiologist. A copy of the full questionnaire is available from NCEPOD on request. The questionnaires were identified only by a number, allocated in the NCEPOD office. Copies of procedure notes and postmortem reports were also requested. If an anaesthetist was involved in the procedure, a separate questionnaire was sent to the relevant consultant. If the patient underwent coronary artery bypass graft (CABG) surgery between PTCA and death, an additional questionnaire was sent to the consultant cardiothoracic surgeon.

Data analysis

The NCEPOD administrative staff managed the collection, recording and analysis of data. The data were aggregated to produce the tables and information in the report.

Advisory groups

The designated NCEPOD Clinical Coordinators (K Callum and K Sherry), together with the advisory group members whose names are shown at the front of this report, reviewed the completed questionnaires and the aggregated data.

Confidentiality

NCEPOD is registered with the Data Protection Registrar and abides by the Data Protection Principles. All reporting forms, questionnaires and other paper records are shredded once an individual report is ready for publication. Similarly, all patient-identifiable data are removed from the computer database.

Before review of questionnaires by the Clinical Coordinators or advisors, all identification was removed from the questionnaires and accompanying papers. The source of the information was not revealed to any of the Coordinators or advisors.

APPENDIX D - LOCAL REPORTERS

Eastern

Papworth Hospital Dr P M Schofield

London

Hammersmith Hospital Dr K J Beatt

King's College Hospital Dr M Thomas

London Chest Hospital Dr R Balcon

St George's Hospital Dr C W Pumphrey

St Mary's Hospital Ms S Smart

St Thomas' Hospital Dr M M Webb-Peploe

The Middlesex Hospital Dr R H Swanton

The Royal Free Hospital Dr D P Lipkin

North West

Cardiothoracic Centre, Liverpool Dr R A Perry

Manchester Royal Infirmary Dr B Clarke

The Victoria Hospital, Blackpool Ms S Arthur

Wythenshawe Hospital Dr N H Brooks

Northern & Yorkshire

Freeman Hospital, Newcastle Dr S Reid

Hull Royal Infirmary Dr M S Norell

Leeds General Infirmary Mr G Tate

South Cleveland Hospital Dr M A de Belder

South East

Southampton General Hospital Dr H H Gray

The John Radcliffe Hospital Dr O J M Ormerod

South West

Bristol Royal Infirmary Dr T Cripps

Royal Devon and Exeter Hospital Dr L D R Smith

Trent

Glenfield Hospital Ms F Stevens

Northern General Hospital Dr R J Bowes

Nottingham City Hospital Dr R A Henderson

West Midlands

Birmingham Heartlands Hospital Dr P F Ludman

Dudley Road Hospital Ms J Humphreys

Walsgrave Hospital Dr M F Shiu

Northern Ireland

Belfast City Hospital Dr G Murtagh

Royal Victoria Hospital Dr T Matthews

Scotland

Aberdeen Royal Infirmary Dr K Jennings

Glasgow Royal Infirmary Ms F Templeton

Royal Infirmary of Edinburgh Dr A D Flapan

Western General Hospital Dr I R Starkey

Western Infirmary Dr J D McArthur

Wales

Morrison Hospital Dr M Anderson

University Hospital of Wales Dr W J Penny

Independent Hospitals

BUPA Hospital Leeds Mr D Farrell

BUPA Hospital Leicester Mrs C A Jones

King Edward VII Hospital,
Midhurst Dr W C Brownlee

London Bridge Hospital..... Ms A Cleary

The Priory Hospital Mr J Sharp

APPENDIX E - PARTICIPANTS

Consultant cardiologists

The following consultant cardiologists returned at least one questionnaire relating to the period 1 September 1998 to 31 August 1999.

Anderson M.H.	Jennings K.
Been M.	Kennedy J.A.
Bennett D.H.	Levy R.D.
Bloomfield P.	Liniger N.J.
Bowes R.J.I.	Ludman P.F.
Brack M.J.	McCoomb J.M.
Brecker S.	Millane T.A.
Buchacter M.B.	Mills P.
Bucknall C.	Morgan J.
Campbell S.	Murray R.G.
Chauhan A.	Oliver R.M.
Connolly D.T.	Ormerod O.J.M.
Corr L.A.	Ramsdale D.R.
Cowie M.	Ramsey M.W.
Crossman D.	Reid D.S.
Cumberland D.C.	Roberts D.H.
Dawkins K.	Rothman M.I.
de Belder M.A.	Schofield P.M.
de Bono D.P.	Shahi M.
Fitzpatrick A.P.	Shaw T.R.D.
Flapan A.D.	Signy M.S.
Foale R.A.	Singh H.
Furniss S.S.	Stewart M.
Gibbs S.	Thomas M.R.
Goode G.K.	Thomas P.
Gray H.H.	Timmis A.D.
Groves P.H.	Uren N.G.
Hall J.A.	Walker J.M.
Harcombe A.	Ward D.E.
Henderson R.A.	Watson R.D.
Howright D.R.	Webb-Peploe M.M.

NCEPOD is also grateful to the small number of consultant anaesthetists and cardiothoracic surgeons who kindly completed and returned questionnaires.

