

SEVERELY INJURED PATIENT STUDY

National Confidential Enquiry into Patient Outcome and Death (NCEPOD)

PATIENT CARE QUESTIONNAIRE (LEAD A&E CLINICIAN)

CONFIDENTIAL

What is this study about?

NCEPOD will be collecting data on all severely injured patients (Injury Severity Score, ISS ≥ 16) that attend Accident and Emergency departments between 1st February 2006 and 30th April 2006 inclusive. The study aims to look at the process of care of severely injured patients at an organisational and clinical level. Data will be collected from all hospitals with an Accident and Emergency department in the National Health Service in England, Wales and Northern Ireland, public hospitals in the Isle of Man, Jersey and Guernsey and Defence Secondary Care Agency Hospitals.

Questions or help

If you have any queries about the study or this questionnaire, please contact NCEPOD at: severelyinjuredpatient@ncepod.org.uk or Tel: 020 7920 0999

How to complete this questionnaire

This form will be electronically scanned. Please use a black or blue pen. Please complete all sections either in block capitals or a bold cross inside the box provided e.g.

Did the patient have a head CT scan?

Yes No

If you make a mistake, please 'black-out' the box and re-enter the correct information e.g.

Did the patient have a head CT scan?

Yes No

Unless indicated, please cross only one box per question.

Definitions: Where ^(def) is indicated, a definition is provided on the back of the questionnaire.

FOR NCEPOD USE

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A. THE PATIENT

1. Age of Patient Years
2. Sex Male Female
3. Date of A&E attendance / / Time of **ARRIVAL** at A&E :
(please use 24-hr clock) h m m
 Unknown
4. How did the patient arrive at A&E?
- a Ambulance as an emergency 999 call
 - b Helicopter
 - c Bought in by member of public
 - d Self
 - e Hospital transfer
 - f Other (please specify) _____
 - g Unknown

B. TRAUMA RESPONSE

5. Had a major incident procedure^(def) been declared before this patient arrived? Yes No
- 6a. Was there a pre-alert^(def) for this patient? Yes No
- b. Was a Trauma team^(def) or equivalent called? Yes No
- 7a. Who was the team leader or person that performed the initial assessment? Grade^(def) Specialty^(def)
- b. Time of initial assessment (please use 24hr clock) :
h h m m Unknown

- 8a. Please list all other clinical staff (e.g. the other members of the trauma team), that responded to the patient in A&E. Please indicate when each person attended the patient. Use **0** to indicate that they were present upon arrival, **< 30 min** to indicate they attended the patient within 30 minutes, and **> 30 min** to indicate that they attended the patient after 30 minutes of the patient's arrival in A&E.

Grade ^(def)	Specialty ^(def)	0	< 30 min	> 30 min
<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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b. Did the team leader have other commitments when the patient arrived? Yes No

c. If **Yes** what were these commitments? *e.g. ward rounds.* _____

d. What time was the patient **FIRST** reviewed by a **CONSULTANT in the A&E department?**
 This could be a trauma team member (*please use 24 hr-clock*) : Unknown Not reviewed by consultant in A&E
 h h m m

Specialty^(def) of this consultant

C. PATIENT'S CARE

9a. When was the first Glasgow Coma Score (GCS) or AVPU determined? (*please use 24-hr clock*) : Unknown Not determined
 h h m m

/ /
 d d m m y y

b. What was this GCS Score? or AVPU?

c. If **NOT** determined please explain why _____

d. Was the cervical spine and/or whole spine immobilized? C-spine Whole spine neither

10a Did the patient have a **HEAD** CT scan? Yes No

b. If **No** why wasn't a head CT scan performed?
 Not considered to be clinically indicated
 Patient not stable enough
 No 24 hour CT
 Unable to get access to CT
 Other (please specify) _____

c. If **Yes** what time was this CT scan? (*please use 24-hr clock*) : Unknown
 h h m m

/ /
 d d m m y y

d. After the decision to perform a CT scan was made, was there a delay in the patient receiving the scan? Yes No Unknown

e. If **Yes** what was the main reason for the delay?
 Patient not stable enough
 Awaiting radiology staff
 Awaiting access to CT
 Awaiting suitable medical staff to accompany patient
 Awaiting porter staff
 Other (please specify) _____

f. What was the grade^(def) and specialty^(def) of Grade^(def) Specialty^(def)

g. When was the CT scan discussed with a neurosurgeon? (please use 24-hr clock) : Not necessary
h h m m
 / / Unknown
d d m m y y

h. Did the patient have an operation for Head Trauma? Yes No i. If **yes** time and date of operation? :
h h m m
 / /
d d m m y y

j. Operation performed _____

11a Did the patient have a CT scan of the chest, abdomen or pelvis? Yes No

b. If **No** why wasn't a CT scan performed?
 Not considered to be clinically indicated
 Patient not stable enough
 No 24 hour CT
 Unable to get access to CT
 Other (please specify) _____

c. If **Yes** what time was this CT scan? (please use 24-hr clock) :
h h m m
 / /
d d m m y y

d. After the decision to perform a CT scan was made, was there a delay in the patient receiving the scan? Yes No

e. If **Yes** what was the main reason for the delay?
 Patient not stable enough
 Awaiting radiology staff
 Awaiting access to CT
 Awaiting suitable medical staff to accompany patient
 Awaiting porter staff
 Other (please specify) _____

f. What was the grade^(def) and specialty^(def) of Grade^(def) Specialty^(def)

g. From the findings of the CT scan did the patient have an operation? Yes No h. If **yes** time and date of operation? :
h h m m

i. Operation performed _____
d d m m y y

12 When was the patient discharged from A&E?
(please use 24 hr clock)

: Unknown
 h h m m
 / /
 d d m m y y

13. Where did the patient go after discharge from A&E?

Theatre
 Level 3^(def) care (e.g. ICU)
 Level 2^(def) care (e.g. HDU)
 Specialist ward (please specify) _____
 General ward
 Transferred to another hospital
 Deceased
 Other (please specify) _____

D. HOSPITAL TRANSFERS

Please complete this section if the patient was transferred from A&E to another hospital

14a Was this a transfer or retrieval^(def)? Transfer Retrieval

b. What grade^(def) was the person who arranged the transfer? Unknown

c. Reason for transfer

Specialist treatment not available at transferring hospital (please specify) _____
 No ICU bed available at transferring hospital
 No HDU bed available at transferring hospital
 Other (please specify) _____

d. Time transfer agreed
(please use 24 hr clock)

: Unknown
 h h m m
 / /
 d d m m y y

e. What was the name of the hospital the patient was transferred to? _____

f. Time patient left hospital
(please use 24 hr clock)

: Unknown
 h h m m
 / /
 d d m m y y

g. If there was a delay in the transfer why was this? _____

15. Who went with the patient during the transfer? Please indicate grade^(def) and specialty^(def)

Grade^(def)

Specialty^(def)

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E. CLINICAL SUMMARY

16. Please provide a clinical summary of the patient's care in A&E. Where possible please include the injuries identified and initial resuscitation.

DEFINITIONS

Grade	See abbreviations on back page.
Level 2 care	Patients requiring more detailed observation or intervention including support for a single failing organ system or post-operative care and those stepping down from higher levels of care. This could be a separate High Dependency Unit (HDU) or a high dependency area on a ward.
Level 3 care	Patients requiring advanced respiratory support alone or basic respiratory support together with support of at least two organ systems. This level includes all complex patients requiring support for multi-organ failure.
Major incident protocol	Pre-planned and exercised procedures which are activated once a major incident has been declared. A major incident is any emergency that requires the implementation of special arrangements by one or more emergency services, the NHS or the local authority. <i>(www.ukresilience.info/contingencies/dwd/annexe.htm)</i>
Pre-alert	Advance notification from the ambulance or other emergency service of the arrival of a patient.
Retrieval	The Retrieval team originates from the receiving hospital and consists of a highly skilled team who have specialist training in the transfer of severely injured patients.
Specialty Codes	See back page.
Trauma Team	A multidisciplinary group of clinicians who have been designated to collectively care for trauma patients in a particular trauma care system.

CLINICIAN GRADES AND NATIONAL SPECIALTY CODES

Consultant = CON	Senior House Officer = SHO
Staff Grade = SG	Pre Registered House Officer = PRHO
Associate Specialist = AS	Nurse with Advance Trauma Certificate = ATNC
Other non-consultant career grade = NCCG	Nurse with RSCN = RSCN
Specialist Registrar year 3 or above = SpR3	Nurse = NURS
Specialist Registrar year 1 or 2 = SpR1 SpR2	Other = OTHR

SURGICAL	100 = General Surgery	110 = Trauma & Orthopaedics	170 = Cardiothoracic Surgery
	101 = Urology	120 = Ear, Nose and Throat (ENT)	171 = Paediatric Surgery
	103 = Breast Surgery	130 = Ophthalmology	172 = Cardiac Surgery
	104 = Colorectal Surgery	145 = Maxillo-Facial Surgery	173 = Thoracic Surgery
	105 = Hepatobiliary & Pancreatic Surgery	150 = Neurosurgery	180 = Accident & Emergency
	106 = Upper Gastrointestinal Surgery	160 = Plastic Surgery	190 = Anaesthetics
	107 = Vascular Surgery	161 = Burns Care	192 = Critical/Intensive Care Medicine
MEDICAL	300 = General Medicine	340 = Thoracic/Respiratory Medicine	501 = Obstetrics
	301 = Gastroenterology	360 = Genito-Urinary Medicine	502 = Gynaecology
	302 = Endocrinology	361 = Nephrology	810 = Radiology
	306 = Hepatology	400 = Neurology	811 = Interventional Radiology
	307 = Diabetic Medicine	401 = Clinical Neuro-Physiology	820 = General Pathology
	314 = Rehabilitation	420 = Paediatrics	821 = Blood Transfusion
	320 = Cardiology	421 = Paediatric Neurology	822 = Chemical Pathology
	321 = Paediatric Cardiology	430 = Geriatric Medicine	823 = Haematology
	330 = Dermatology	500 = Obstetrics and Gynaecology	000 = Other (Medical or Surgical)