SEVERELY INJURED PATIENT STUDY

National Confidential Enquiry into Patient Outcome and Death (NCEPOD)

PATIENT CARE QUESTIONNAIRE (ADMITTING CONSULTANT)

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.

Was this consultant the admitting consultant?

☒ Yes   ☐ No

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

Was this consultant the admitting consultant?

■ 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 ☐☐☐☐☐☐

A. THE PATIENT

1. Age of Patient ☐☐☐ Years

2. Sex ☐ Male ☐ Female

3. Date of admission ☐☐ / ☐☐ / ☐☐ Time of admission ☐☐ : ☐☐
                     d d   m m   y y *(please use 24-hr clock)* h h   m m

           ☐ Unknown

B. THE PATIENT'S CARE

4. Specialty(def) code of admitting consultant ☐☐☐

5. Where was the patient admitted to?

  ☐ Level 3(def) care (e.g. ICU)

  ☐ Level 2(def) care (e.g. HDU)

  ☐ Specialist ward (please specify) _____

  ☐ General ward

  ☐ Other (please specify) _____

6a. Time and date the patient was **FIRST** reviewed by a **CONSULTANT** after being admitted to a ward or critical care unit *(please use 24-hr clock)*

  ☐☐ : ☐☐   ☐ Unknown
  h h   m m

  ☐☐ / ☐☐ / ☐☐   ☐ Not reviewed by consultant in first 72 hrs
  d d   m m   y Y

b. Was this consultant the admitting consultant? ☐ Yes ☐ No

c. If **No**, what was the specialty(def) of this consultant? ☐☐☐

7. What operation(s) did the patient have in the first 72 hrs?

a. Date of first visit to theatre ☐☐ / ☐☐ / ☐☐ Start time (*please use 24-hr clock*) ☐☐ : ☐☐
                   d d   m m   y y   h h   m m

b. Operation(s) performed at this time (please specify) _____
_____
_____

c.	Date of second visit to theatre	☐☐ / ☐☐ / ☐☐ d d m m y y	Start time (*please use 24-hr clock*)	☐☐ : ☐☐ h h m m

d. Operation(s) performed at this time (please specify)

_____

_____

_____

e.	Date of third visit to theatre	☐☐ / ☐☐ / ☐☐ d d m m y y	Start time (*please use 24-hr clock*)	☐☐ : ☐☐ h h m m

f. Operation(s) performed at this time (please specify)

_____

_____

If the patient went to theatre on more than 3 occasions in the first 72 hrs please include details of these other operations in the clinical summary.

C. HOSPITAL TRANSFERS

Please complete this section if the patient was transferred to another hospital within 72 hrs of admission

8a 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

☐ Receiving hospital closer to patient's home

☐ Other (please specify) _____

d. Date and time transfer agreed (*please use 24 hr-clock*)

☐☐ / ☐☐ / ☐☐ ☐ Unknown
d d   m m   y y

☐☐ : ☐☐
h h   m m

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

_____

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

☐☐ / ☐☐ / ☐☐ ☐ Unknown
d d   m m   y y

☐☐ : ☐☐
h h   m m

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

_____

9. Who went with the patient during the transfer? Please include grade(def) and specialty(def)

Grade(def)	Specialty(def)
☐☐☐☐	☐☐☐
☐☐☐☐	☐☐☐
☐☐☐☐	☐☐☐

D. PATIENT OUTCOME

10a. Where was the patient 72 hours after admission?

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

b. If in hospital what was the specialty(def) of the consultant whose care the patient was under at 72 hours after admission? ☐☐☐

11a. Where was the patient 30 days after admission?

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

b. If in hospital what was the specialty(def) of the consultant whose care the patient was under at 30 days after admission? ☐☐☐

E. CLINICAL SUMMARY

12. Please provide a clinical summary of the first 72 hours of the patient's care. Where possible this should include the injuries identified, operations performed and definitive care.

DEFINITIONS

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.
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.

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)**