

GYNAECOLOGY TRIGGER LIST

CLINICAL INCIDENT

ORGANISATIONAL INCIDENT

- Vasovagal attack following outpatient procedure/examination which required medical intervention
- Delayed or missed diagnosis (e.g. ectopic pregnancy)
- Any MRSA on Gynaecology Ward/Gynaecology Patient
- Anaesthetic complications
- Procedure performed without consent /not in the patient's best interest
- Omission of planned procedures (e.g. failure to insert a planned intra-uterine contraceptive device after a hysteroscopy)
- Failed procedure (e.g. abortion, sterilization)
- Change of access during operation due to unexpected complications (e.g. Laparoscopic/vagina – open or Transverse – Midline)
- Damage to structures (e.g. bladder, ureter, bowel, blood vessel)
- Complications relating to recognised/unrecognised injury presenting later (e.g. fistula)
- Unexpected operative blood loss > 1000ml
- Blood transfusion (not anticipated by pre-op Hb)
- Unplanned intensive care admission
- Wound complications requiring readmission
- Unplanned return to theatre
- Hospital acquired venous thromboembolism
- Critical/severe ovarian hyperstimulation (assisted conception)
- Unplanned readmission to hospital within 30 days following a procedure
- Retained swab/instrument

- Clinic over-run by >90 mins
- Missing/mixed up investigation results
- Delay following call for assistance
- Faulty equipment
- Conflict over case management
- Potential service user complaint
- Medication error
- Marked deviation from local guideline
- Overnight stay on trolley in EGAU
- Transfer of patients across sites

Trust policy

Unplanned return to theatre

Unplanned readmission

Prolonged episode of care

Extra time in hospital or as an inpatient

Cancelling of treatment

Unplanned ITU admission

Harm Event due to Covid 19 Pandemic

Low Harm – prolonged symptoms eg wait for OPA>18weeks; delay to P1 surgery

Moderate Harm – increase in symptoms, medication or treatment eg pt attending EGAU while on OPWL or IPWL; A&G request to expedite treatment

Severe Harm – irreversible disease progression, death on waiting list, delayed diagnosis or progression of cancer eg pt>39yrs waiting >6months for fertility treatment

Harm as a result of Covid 19 eg hospital acquired or perioperative C19; infection control breach; pathway or guidance not being followed; care compromised due to delay relating to C19

This is **not** exhaustive

Any event which is **not a normal consequence** of care please report

Incident Reporting

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Key amendments to this Document:

Date	Amendment	By:
29 th December 2023	Document extended for 6 months whilst under review to 29 th June 2024	Alex Blackwell
20 th August 2024	Document extended for 6 months whilst under review to 20 th February 2024	Alex Blackwell

DR

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