

# Operative Reporting Assessment in Central Line Insertion

Dr Noora Al-Shahwani, Dr Sheyma Al-Romaihi  
PEDIATRIC SURGERY DEPARTMENT



**BACKGROUND:** The classic way of reporting, a narrative operative report or dictated one, is often affected by experience level and complexity of the procedure. This is clear in the reports written/dictated by junior residents compared to more senior residents or house staff (1). In addition, such free form recording seldom fails to capture all essential data for all cases (2, 3). This can compromise decisions in patient management.

Operative templates are used by many services around the world and offer a great solution for those shortcomings. Specifically, it improved overall reporting of essential criteria (2,4). It also leads to greater consistency and inter-reporter reliability (5).

**AIM:** Assess operative reporting in Hamad hospital, specifically for Central venous line (CVL) insertion in pediatric cases (<14 year old) over the last two years.

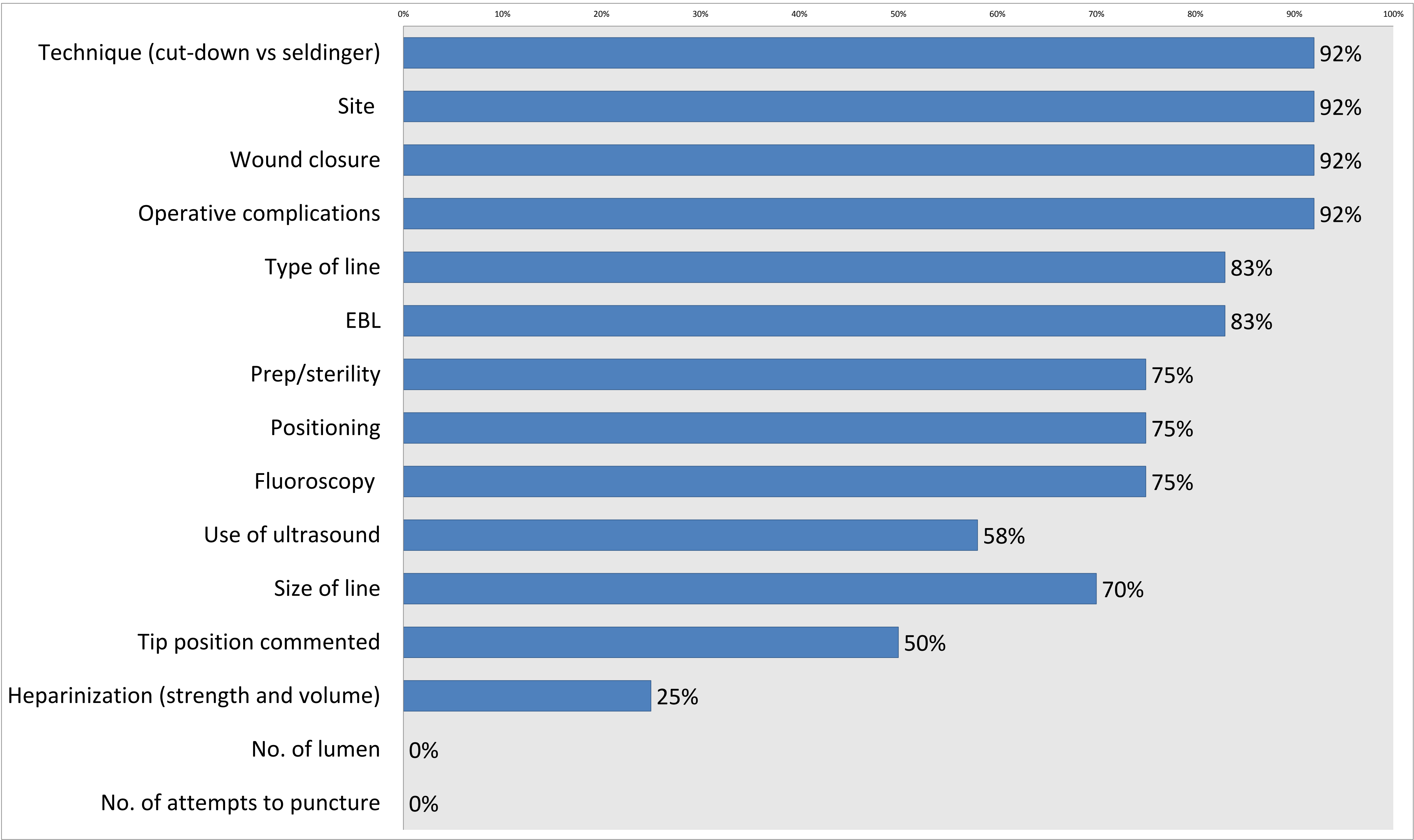
**METHODS:** Review of medical records of cases operated in Hamad general hospital (HGH) by pediatric surgery service (patients <14 year of age) over the last two years. The criteria of completion were identified agreed upon by the consultants in the service, excluding the HMC institutional requirements (table 1). Estimated blood loss and operative complications are institutional requirements, however, often not missed on documentation, and were thus included as part of criteria of reporting. In addition to the presence/absence of the essential criteria, reporter and surgeon’s level was noted.

Table 1: Institutional Requirements for operative reporting in HMC.	
Patient’s name and demographics	Name(s) of anesthesia technician(s)
pre- and post-operative diagnosis	Operative report narrative
Name(s) of surgeon(s)	Date and time
Name(s) of assistant(s)	Name of Consultant
Name(s) of nurses	Estimated blood loss (EBL)
Name(s) of anesthetist(s)	Operative complications

**REFERENCES:**

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**RESULTS (prelim):** Of 61 patients operated (72 surgeries), 12 medical records were available for assessment.  
A point was given to each of the 20 essential criteria of completion. The average score was 9 out of 15 (60%) with a range of 4(27%) to 12 (80%).



The reporter is most often the resident, (59%), followed by specialist (33%) then consultant (8%). The average score for resident is 10.1, and 7.25 for specialist, and 8 for consultant. The reporter was the surgeon in 33% of the cases with score of 12 for the resident, 9 for specialist and 8 for consultant.

- NEXT STEP:**
- Create a template for operative reporting in CVL insertion and implement it.
  - Cross check the completeness of reporting against written reports using same criteria, with the aim of improving it > 90%.
  - Provide guidelines to OR report dictation (general), to all staff specially trainees, as form of guidance/training.

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