



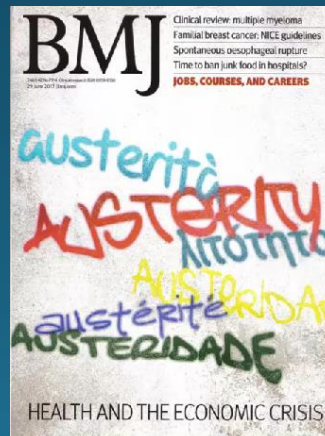
# TTA Completion in Theatre

MSK Audit Meeting July '13

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# Introduction - Why is this important?

- Ward cover often very busy, potentially delaying discharge time if TTA letter cannot be completed promptly
- Patients sometimes unnecessarily stay an extra night or become an afternoon discharge, increasing costs and increasing the challenge of bed management and increase department efficiency
- Increases workload for ward staff and removes ward doctor from clinical duties such as daily patient review and acutely unwell patients.
- Follow up instructions on op notes may be missed or misunderstood by doctor not present during the operation.
- One of junior doctor issues of discontent associated with a lack of proper team structure. Deanery placements at risk.



# Introduction - Method

- Collected all theatre lists for 3<sup>rd</sup> – 8<sup>th</sup> June, excluding trauma lists
- Reviewed all discharge letters,
- Analysed data in Excel –
  - day stay and main theatre lists.
  - Patients same day, next day or 2+ days
  - registrar vs. SHO assistants
  - Locum vs trainee
- Analysed which types of procedure patients were discharged same or next day

# Results

Day Stay

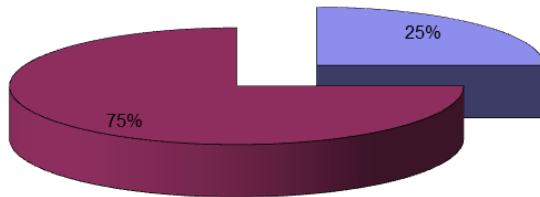
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Main Theatre

30

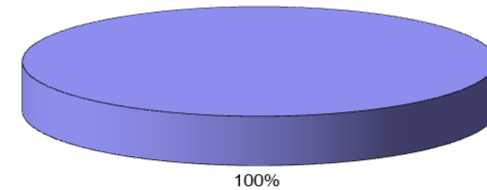
# Results – Day Stay

**Theatre Assistants**



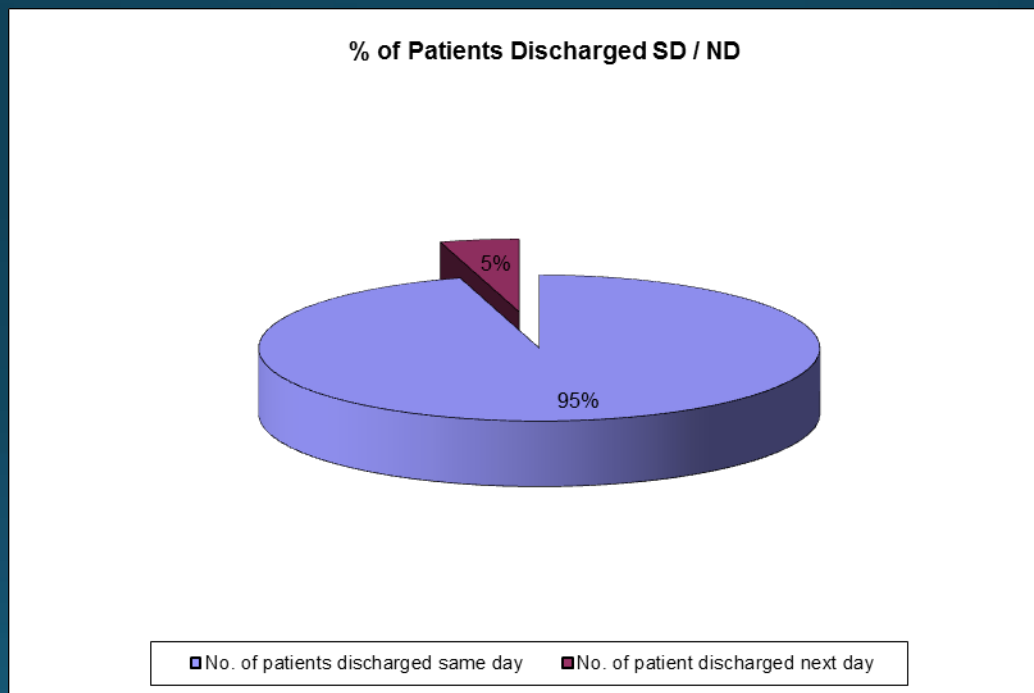
■ Total Lists w/Regs ■ Total Lists w/SHOs

**% TTAs Completed in Theatre**



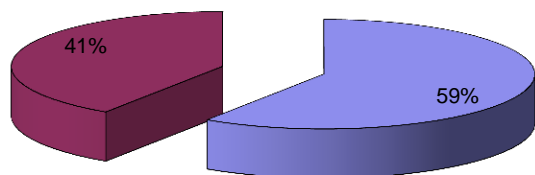
■ % of TTAs Completed in Theatre

# Results – Day Stay



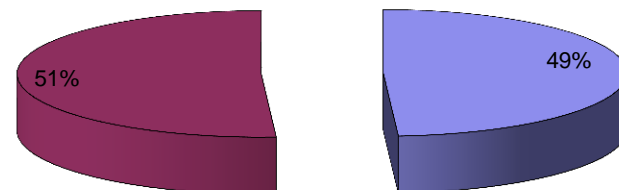
# Results – Main Theatre

**% Discharges SD/ND vs. > 2 days**



■ Total SD/ND Discharges ■ Total discharges > 2 days

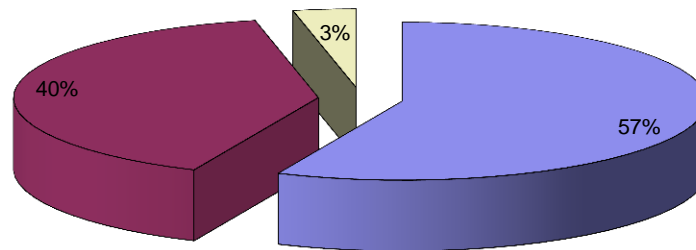
**Overall % SD/ND TTAs Completed / Not Completed in Theatre**



■ No. of SD/ND TTAs Complete in Theatre  
■ No. of SD/ND TTAs Not Complete in Theatre

# Results – Main Theatre

Assistants in Theatre

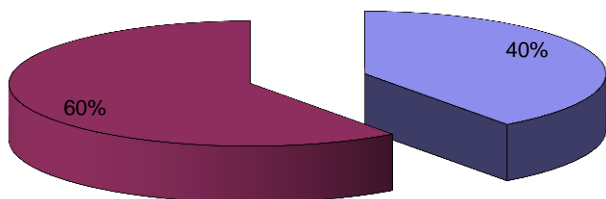


■ Total Lists w/Regs ■ Total Lists w/SHOs ■ Total Lists w/both



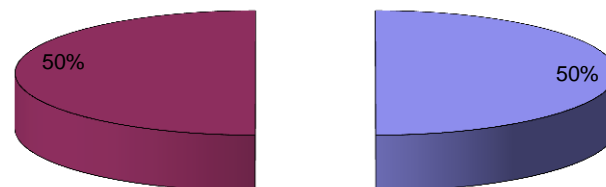
# Results – Main Theatre

**% SD/ND Discharge TTAs Completed in Theatre - SHOs**



■ Total SD/ND TTAs Complete in Theatre  
■ Total SD/ND TTAs not Complete in Theatre

**% SD/ND Discharge TTAs Completed in Theatre - Registrars**



■ Total SD/ND TTAs Complete in Theatre  
■ Total SD/ND TTAs not Complete in Theatre

# Locum vs. Training SHOs

- 100% of SD/ND discharge letters completed in main theatre by training HO/SHOs
- 0% of SD/ND discharge letters completed in main theatre by locum SHOs

Region	Procedure	No. discharged SD	No. discharge ND	No. discharged > 2 days	Total Procedures	% SD/ND Discharges
Hand	Carpal tunnel decompression	1	1		2	100%
	Trigger finger release	1			1	100%
	ORIF Finger	2			2	100%
	Carpal tunnel + DIP Arthroplasty/Flap	1			1	100%
	Glomus Tumor Excision	1			1	100%
	Arthrodesis - Finger		1		1	100%
Upper Limb	Arthroscopy - Shoulder	2	1		3	100%
	Ulnar Shortening	0	1		1	100%
	Subacromial decompression	2	2		4	100%
	ORIF Clavicle		1		1	100%
	Arthroscopy - Wrist	1			1	100%
	DeQuervain's Tendon Release	1			1	100%
	Tennis Elbow Release	3			3	100%
	Cubital Tunnel Decompression		1		1	100%
	Shoulder replacement			1	1	0%
Lower Limb	Hemiarthroplasty head of femur			2	2	0%
	Total Hip Replacement			9	9	0%
	Total Knee Replacement			7	7	0%
	Arthroscopy - Ankle	1			1	100%
	Removal Total Knee Replacement			1	1	0%
	Arthroscopy - Knee	10	3		13	100%
	Arthodesis/Fusion - Ankle			1	1	0%
	Akins Osteotomy	1			1	100%
	MTP Fusion		1		1	100%
	Achilles Tendon Repair		1	1	2	50%
	ACL Repair - Arthroscopic		1		1	100%
	Morton's Neuroma Excision	1			1	100%
Spinal	Lumbar discectomy/decompression		2	3	5	40%
	PLIF/Lumbar decompression			3	3	0%
	Revision lumbar decompression			1	1	0%
Children	Injection - Knee	2			2	100%
	Excision/phenolysation toe nail	1			1	100%
	Exostosis of bone excision	1			1	100%
	ORIF Radius/Ulnar		1		1	100%
Miscellaneous	Removal of Metalwork	4	2		6	100%
	MUA	4			4	100%
	Excision of foreign body	1			1	100%

# Conclusion

- 100% TTAs completed in day stay theatres
- 59% of all patients go home same or next day from main theatres
- Not enough TTAs completed in main theatres for short stay cases - less than 50% of SD/ND discharges have TTAs completed
- 26 extra TTAs for SD/ND discharges completed by ward or trauma doctor over week
- Potential for efficiency to be improved

# Suggestions

- List of procedures requiring compulsory in-theatre TTAs to be circulated during induction session
- Senior encouragement/reminder that expectation is for short-stay TTAs to be done.
- If reliant on locums improved access to ICE on 1<sup>st</sup> day (ie locum logon) and induction pack for locums with what is expected and how to do it
- Increase time before regular meds need to be prescribed on TTAs to 48hrs (currently 24hrs)
- Better communication between surgeon and assistant re: follow up etc.
- Template TTAs for common procedures.
- If procedure length of stay 2+ days consider starting TTAs in theatre.
- Re-audit if any suggestions agreed by department.

# Limitations

- Only one week audited
- Trauma lists not included
- Completion times based on when letter first opened and discharge time based on when letter was printed
- Unable to determine if uncompleted letters delayed actual discharge time
- Patients may leave without a completed TTA

# DOCTORS



What my mom thinks I do



What my friends think I do



What my girlfriend thinks I do



What society thinks I do



What I think I do



What I really do

Jadooger.com