Saf e and Quality Considerations in Transoral Surgery

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ABSTRACT

OBJECTIVES:

1) To perform a comprehensive review of the literature on quality care and patient safety topics related to transoral surgery (TOS)
2) Identify safety and quality topics for surgical teams to consider when performing TOS
3) Propose recommendations for safety and quality best practices in TOS based on current literature and expert opinion

METHODS:

Comprehensive literature review, expert opinion, and clinical consensus were utilized.

RESULTS:

Salient patient safety risks and quality care issues in TOS include: bleeding, airway compromise, laser safety, iatrogenic soft tissue injury, specimen handling and margin analysis, and surgical team competency. Current literature related to these topics is summarized. A TOS surgical safety and quality care checklist was developed based on previous successful models, expert opinion, and current literature review.

CONCLUSION:

TOS techniques are increasingly utilized and important treatment options for the management of neoplastic diseases of the head and neck. Quality and safety initiatives are integral to current surgical practice. There is currently a paucity of literature on these subjects as they relate to TOS. A first step towards promoting further research on these topics may include further consensus building amongst experts, with subsequent validation of a comprehensive surgical safety and quality care checklist that addresses the unique risks and technical requirements of TOS procedures.

REFERENCES


CONCLUSION:

1. Patient safety and quality initiatives are increasingly influential in our current health care environment, yet there is currently a paucity of literature describing quality and safety issues unique to TOS techniques.

2. As TOS is increasingly utilized outside of high volume centers, it is imperative for surgical teams to consider the patient safety and quality care issues specific to these procedures.

3. A TOS-specific surgical checklist may be useful in promoting patient safety and quality care for patients and surgical teams. Further consensus conferencing amongst a broad group of experienced transoral surgeons would be prospective validation is required.

REFERENCES: