Audit of Patients Undergoing Thyroid Surgery in an Attempt to Improve the Standard of Care

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Objectives: To improve the standard of care for patients undergoing thyroid surgery. Recognised complications include hypocalcaemia and recurrent laryngeal nerve (RLN) damage. We aimed to review our practice and improve it, by adhering to the criteria set out by the National Institute of Clinical Excellence.

Method: Retrospective audit looking at patients undergoing thyroid surgery over 6 month period (09/2012). Pro-forma used to establish the adequacy of documentation including: the use of nerve monitoring equipment, identification and stimulation of the RLN, and the recording of pre and post op vocal cord checks (n=18). Retrospective re-audit after recommendations to complete the loop (n=8) over a 4 month period.

Results: The first part of the audit cycle identified haphazard management of calcium levels in the post operative period, incomplete documentation of vocal cord checks, and RLN identification and testing during surgery. Recommendations and guidance to staff, as well as a revised protocol on calcium management resulted in improved care overall following re-audit. Part 2 of the audit cycle, only 1 patient became hypocalcaemic in the post-operative period and was managed successfully following the protocol. RLN detection, testing and monitoring were documented in all patients. The 2nd loop showed that all patients were receiving documented RLN identification and stimulation intraoperatively, all patients had documented pre and post op cord checks and use of a nerve monitor (n=10).

Conclusions: The audit shows we were able to meet the criteria set out by NICE.

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