

TOP 10 QUALITY INDICATORS SELECTED BY BELGIAN ANESTHESIOLOGISTS

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BACKGROUND & GOAL

Quality and patient safety (QPS) is becoming increasingly important in the organization of healthcare.

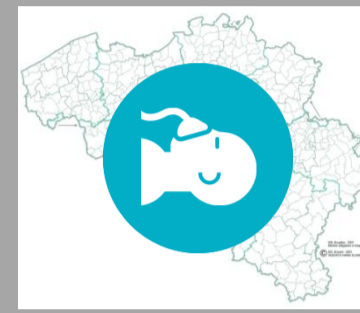
In Belgium, there is very little experience with quality indicators (QI) for Anesthesia.

There is also no national standard for measuring quality in anesthesia, nor for benchmarking between hospitals.

GOAL:

To explore opinions on the collection and use of QI for Anesthesia.

METHODS & MATERIALS

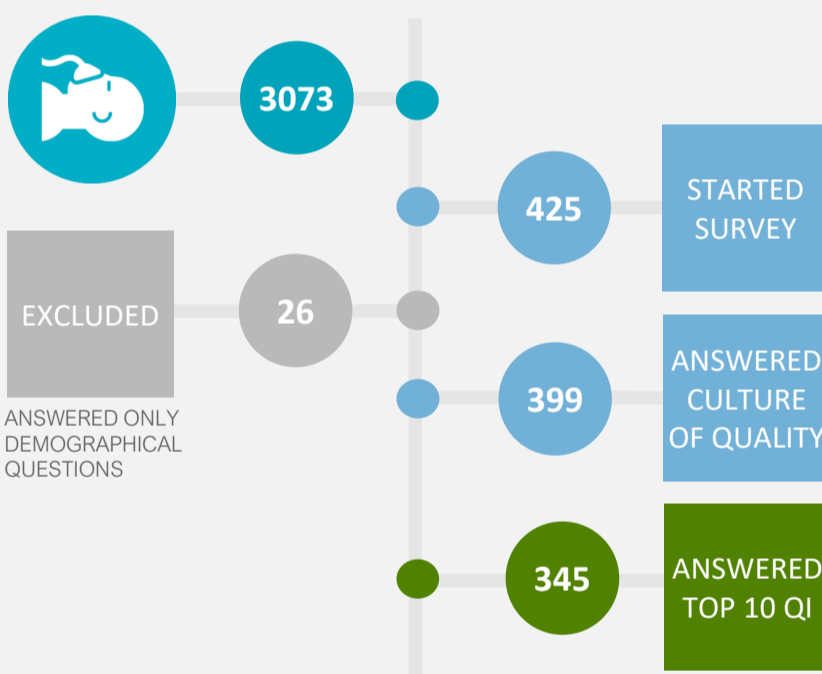


Opinions about the importance of 31 QI.

All data were acquired anonymously.

The study was approved (n° B012201835189) by the Committee for Medical Ethics of az Sint-Blasius.

RESULTS & DISCUSSION

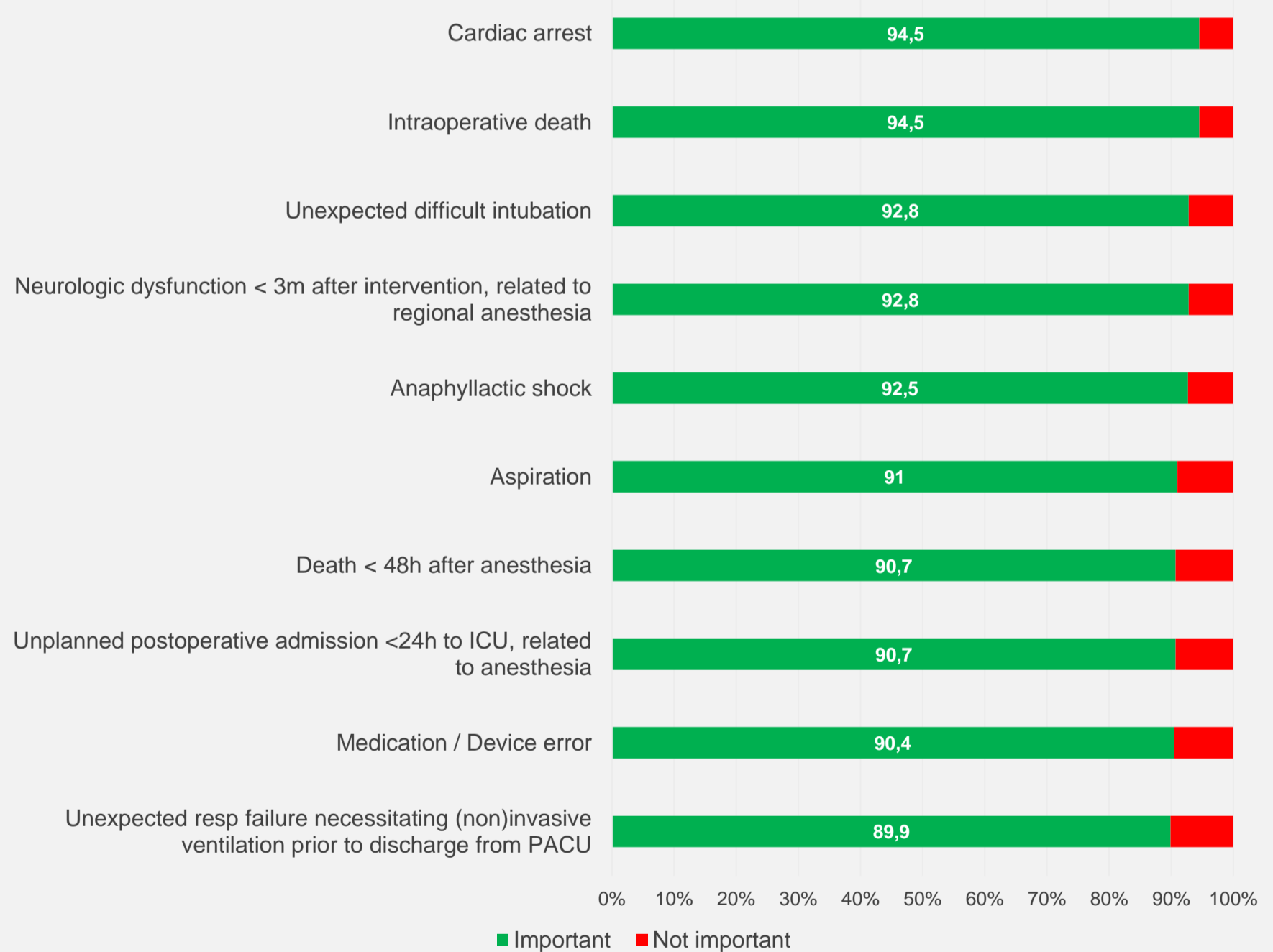


Other QI for Anesthesia (not selected):

Importance 89-50%, in decreasing order:
 Malignant hyperthermia
 Impossible mask ventilation
 Severe pain (NRS > 7) in PACU
 Unplanned admission after day-stay surgery, related to anesthesia
 Prolonged neuromuscular blockade
 Accidental dural puncture
 Dental damage
 PONV requiring treatment in PACU
 Absence of pre-anesthesia assessment
 Failed regional anesthesia, with conversion to general anesthesia
 Emergency C-section, with conversion from regional to general anesthesia
 Elective C-section, with conversion from regional to general anesthesia

Importance < 50%, in decreasing order:
 Death during hospital stay
 Emergency C-section with general anesthesia
 Hypothermia <36°C (96.8°F) upon arrival in PACU
 Unplanned pre/perioperative discontinuation of beta blockers
 Unplanned PACU-stay > 2h
 Elective C-section with general anesthesia
 Non-emergency bleeding, where Hb is measured prior to RBC-transfusion
 Death within 30d
 Death after hospital discharge

Top 10 QI for Anesthesia



CONCLUSIONS

There is a broad consensus among Belgian anesthesiologists on the top 10 QI for Anesthesia. This top 10 will be presented to the anesthesia departments and professional associations.

Furthermore, these results could be used to establish a national standard for QI in Belgium.

More research on this matter is needed to further implement QI as a way of developing and maintaining QPS in anesthesia.