

PQIP Perioperative Quality Improvement Programme

PQIP into the future

What to add, what to bin

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PQIP Collaborative Events 2018

What to add ...

- Consideration of additional data fields
- Large dataset informing the evidence base more rapidly
- An opportunity to study the impact of peri-operative processes on longer-term outcomes

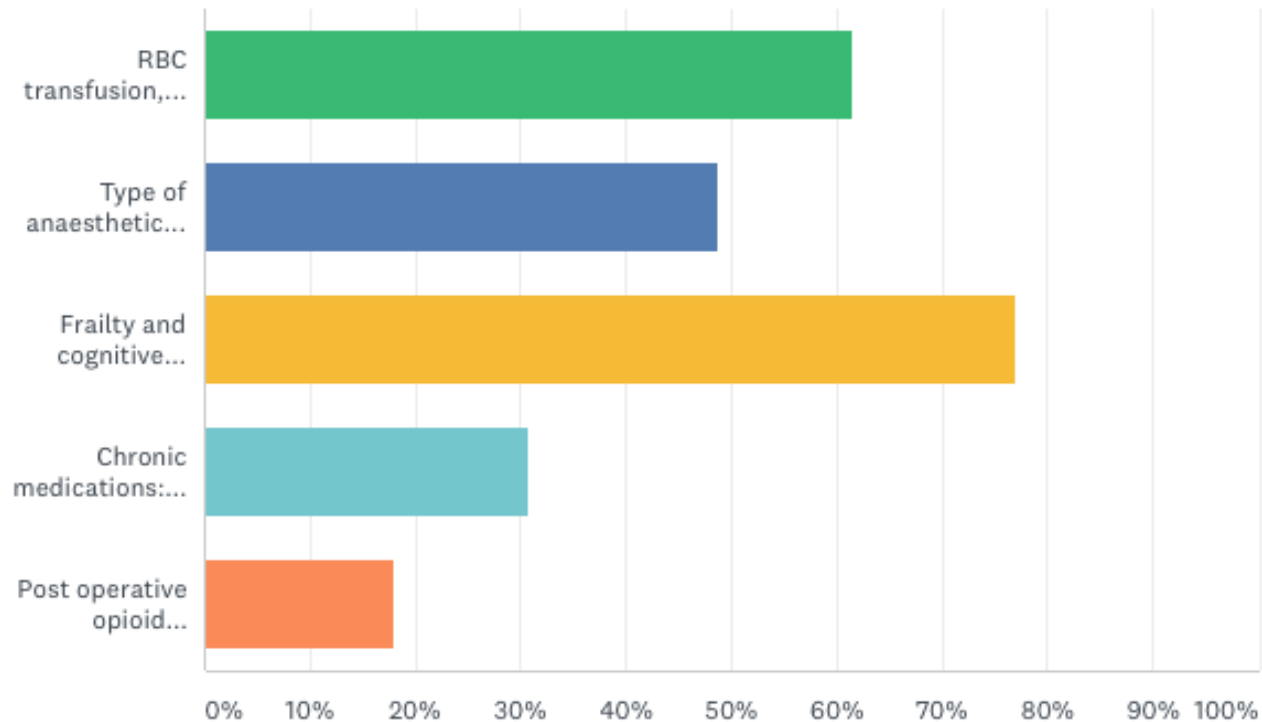
What to add ...

- Requirements:
 - Rationale – supportive literature
 - Reflecting current concerns / interest
 - Straightforward to collect
- Other considerations:
 - Informing future research
 - To use as a QI measure

Q1

Which are the most appropriate new PQIP data fields? Tick as many/few as you like. Please suggest your own ideas in the free comment box

Answered: 39 Skipped: 0



Perioperative Quality Improvement Programme



Transfusion

- Evidence that peri-operative transfusion may increase cancer recurrence risk
 - Dose-response relationship demonstrated in colorectal cancer
- Intra and post-operative RBC transfusion
 - Yes / no
 - Number of units

Anaesthetic agent type

- Evidence that anaesthetic maintenance agent may influence cancer recurrence risk
 - Retrospective evidence suggesting TIVA has a “protective” role
 - Laboratory evidence suggesting differences between volatile agents
(NB Depth of anaesthesia monitor use is already recorded)
- Anaesthetic maintenance
 - TIVA / Volatile
 - Type of volatile

Frailty

- Evidence that frailty is associated with worse outcomes / QoL
 - Some evidence that intervention (CGA) may improve things etc
- Evidence of frailty
 - Yes / No or Scale?
 - Simple testing (clockface, memory test, clinical “eyeballing”)
 - Questionnaire
 - Biometrics: eg sarcopenia
- (Dementia: already recorded)

Frailty and post-op delirium?

- Delirium / POCD: short and long term
 - Definition
 - Reliance on relatives?

Chronic medications

- Beta-blockers, ACEI/ARB, steroid
 - May be protective, or omission may lead to harm
 - *Continuation of BB / statin as a QI standard?*
- Evidence of prolonged omission?
 - Days without routine meds?
 - Difficult to record with accuracy
 - Would we know what we're looking for?

Post-operative opiate use & dependence

- Prolonged opiate use after surgery may lead to dependence
- Opiate use after surgery
 - Days receiving systemic opiates (how long is prolonged?)
 - Difficult to quantify: varying doses of different drugs
 - Record long-term use after surgery
 - Many of our patients have cancer, and some will be on opiates for palliative care ...

Post-operative opiate use & dependence

	pre-op	6/12 post surgery	12/12 post surgery	discharge letter
What is your current medication?	√	√	√	
Deprescribing and safe disposal questions				
Were you given verbal instructions what to do with unwanted / excess post-operative pain killers?		√		
Were you given written instructions what to do with unwanted / excess post-operative pain killers?		√		
Were you given verbal instructions on how to stop your post-operative pain killers?		√		
Were you given written instructions on how to stop your post-operative pain killers?		√		
was tapering advice given in discharge letter				√
do you still have any of the painkillers in your home that you were discharged with ?		√	√	
do you still have any of the painkillers in your home that you were discharged with ?		√	√	
did you go back to your GP and get more painkillers		√	√	

The rest ...

- Cardiac injury and long-term outcomes
 - MINS & high-sensitivity troponin
 - Dabigatran treatment
- Use of reversal agent
 - Which one? Differences in PPC incidence?

What to bin?

- Your chance to express opinion about what we shouldn't collect
 - Smoking cessation
 - Albumin
 - Post-op: QoL at 3 days
 - ??? Long-term data (only 50% response so far)
 - Anything else?



Perioperative Quality
Improvement Programme

