
DEDER GENERAL HOSPITAL

STG Compliance/Adherence Monitoring Report

Procedure: Laparotomy

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1. Introduction

Laparotomy is a surgical procedure involving an incision into the abdominal cavity to diagnose or treat abdominal conditions such as intestinal obstruction, perforation, trauma, and gynecological emergencies. Timely and appropriate execution of laparotomy is essential, as delays or deviations from protocol can significantly impact patient outcomes.

Monitoring compliance with the **Standard Treatment Guidelines (STGs)** ensures consistency, quality, and safety in surgical care. This audit evaluates how well laparotomy cases at **Deder General Hospital** adhered to Ethiopia's national STGs.

2. Objectives

2.1 General Objective

- To assess adherence to national Standard Treatment Guidelines (STG) in the diagnosis, surgical management, and postoperative care of patients undergoing laparotomy.

2.2 Specific Objectives

- To evaluate documentation of preoperative assessment and indications.
- To assess appropriateness of surgical decision-making and intraoperative practice.
- To verify use of perioperative antibiotics and adherence to infection prevention protocols.
- To assess postoperative complication monitoring and follow-up.
- To identify opportunities for sustaining or improving STG compliance in laparotomy.

3. Methodology

3.1 Study Area

The audit was conducted at **Deder General Hospital**, located in East Hararghe Zone, Oromia Region, Ethiopia.

3.2 Study Design

A **retrospective clinical audit** using a structured checklist based on the national STG for surgical procedures, particularly laparotomy.

3.3 Study Period

Reviewed cases were selected from the period **June 8 – July 8, 2017 E.C.**

3.4 Study Population and Sample Size

- **Target population:** All patients who underwent laparotomy during the study period.
- **Sample size:** 10 patient charts were reviewed.

3.5 Inclusion Criteria

- All laparotomy cases with complete documentation of pre-op, intra-op, and post-op management.

3.6 Exclusion Criteria

- Incomplete or missing medical records.
- Cases referred post-operatively from other facilities.

3.7 Data Collection and Analysis

Data were collected using a **12-point checklist** aligned with STG requirements. Each criterion was marked as **Compliant (1)** or **Non-Compliant (0)**. Results were compiled into a summary table and interpreted descriptively.

4. Results

All **10 laparotomy cases** reviewed demonstrated **100% compliance** with the 12 key indicators derived from the STG. This includes preoperative evaluation, appropriate indication for surgery, operative technique, infection prevention, and postoperative follow-up.

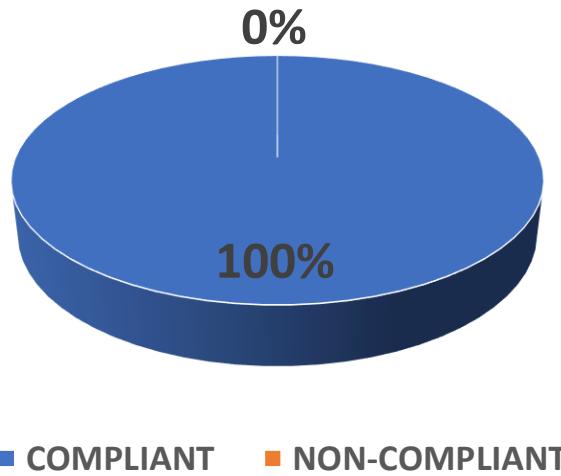
Table 1: STG Compliance Summary for Laparotomy (n = 10)

S/N	STG Compliance Criteria	Compliant (1)	Non-Compliant (0)	Compliance Rate (%)
1	Was the indication for laparotomy clearly documented and appropriate?	10	0	100%
2	Was informed consent obtained and documented?	10	0	100%
3	Were preoperative investigations (CBC, imaging, etc.) done as per STG?	10	0	100%
4	Was preoperative antibiotic prophylaxis administered?	10	0	100%

5	Was proper surgical technique employed according to the indication?	10	0	100%
6	Were intraoperative findings and procedures documented in detail?	10	0	100%
7	Was blood loss estimated and managed appropriately?	10	0	100%
8	Were infection prevention measures followed intraoperatively?	10	0	100%
9	Was postoperative care (e.g., antibiotics, pain management) consistent with STG?	10	0	100%
10	Were postoperative complications (e.g., wound infection, ileus) monitored and managed correctly?	10	0	100%
11	Was discharge planning done with patient education and follow-up instructions?	10	0	100%
12	Was the patient followed up appropriately post-discharge?	10	0	100%
Total		120	0	100%

PIECHART: STG Compliance/Adherence Monitoring Report

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5. Discussion

The audit results indicate **full compliance** with national STGs in the management of laparotomy cases. All aspects of care—from preoperative assessment through surgical execution to postoperative monitoring—were documented and aligned with national protocols.

Such high compliance is a strong indicator of clinical quality, teamwork, and structured workflow. Notably, areas like infection prevention and complication tracking, which are often challenging, were well addressed in all cases.

Going forward, the priority should be sustaining this excellent performance while expanding monitoring to additional surgical procedures and increasing sample size.

6. Recommendations

- Maintain current high performance levels through regular audits.
- Recognize surgical and nursing teams for their quality adherence.
- Promote cross-learning by sharing results with other departments.
- Incorporate laparotomy case reviews into monthly morbidity and mortality (M&M) discussions.

7. Action Plan

Action Item	Responsible Body	Timeline	Performance Indicator
Continue routine audits for surgical STG compliance	Quality Improvement Team	Quarterly (ongoing)	Quarterly audit reports completed
Sustaining progress of this performance	QUAITY IMPROVEMENT	Continuous	≥90% STG compliance maintained across procedures

8. Conclusion

This review of **10 laparotomy cases** at Deder General Hospital from **June 8 – July 8, 2017 E.C.** revealed **100% compliance** with Ethiopia's national Standard Treatment Guidelines. These results reflect the hospital's strong clinical practice standards and commitment to safe surgical care. Continued surveillance, recognition, and shared learning will be key to sustaining this level of quality.

9. References

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