Q5 Please list unit-level factors (registered nurses, other support staff, scheduling, etc) considered necessary for colon ER

Answered: 12 Skipped: 0

#	RESPONSES	DATE
1	-Patients must be scheduled for adequate time and should not slated into a standard time slot A nurse with experience in advanced tissue resection must be scheduled for the caseA second individual (nurse or resident) must also be available during the caseFor very large resections, lesions in difficult locations and in patients with significant comorbidity monitored anaesthia care should be consideredAll necessary equipment must be available. Suggest use of equipment checklist (CO2, snares, clips, coag graspers, loops, etc.) -Units must be capable of prolonged patient observation if necessary with provision for hospital admission when necessary.	1/13/2018 5:05 AM
2	Trained nurses. Dedicated time allocation. Video recording of procedures to audit and discuss complications.	12/7/2017 5:31 PM
3	 Appropriately trained nurse assistant - Appropriate understanding of booking slots/ procedure time for complex procedures among administrative staff - Appropriate arrangements for dealing with complications - emergency pathways etc. for the Endoscopy staff and Surgical colleagues providing cover 	12/3/2017 9:16 PM
4	* 2 nurses in room * if propofol: anesthesiology nurse * room for different time-slots * consider observation for one night (in specific cases) * ideally not scheduled on Friday	11/18/2017 9:03 PM
5	ADEQUATE PRE-PROCEDURE ASSESSMENT AND BOWEL PREP PLANNING/EDUCATION EXPERIENCED ENDO NURSES EXPERIENCED SEDATIONIST/ANAESTHETIST ADEQUATE ADMISSION/RECOVERY SERVICE APPROPRIATE RECALL SERVICE FOR SURVEILLANCE	11/7/2017 10:42 PM
6	1. Experienced schedulers and case managers who ensure that all the necessary information required for scheduling patients is available for the clinic visit and then for the scheduled endoscopic procedure. 2. Experienced nurses (it is our practice to have two experienced nurses in every room during our therapeutic endoscopic procedures that include resection of large complex colon polyps) 3. Anesthesia support (most procedures in our lab performed in the setting of monitored anesthesia care) 4. Experienced pathologists	11/5/2017 1:21 PM
7	1. Competent nursing staff familiar with standard equipment listed in point 4 above 2. For large polypectomy where procedure time likely to be more then 1 hour, dedicated sedationist with expertise in propofol sedation (anaesthetist, other proceduralist with credentialing in propofol sedation) 3. Adequate time allocation proportional to degree of complexity of the ER 4. Backup services: Onsite radiology, surgical backup, ability for admission in event of a complication 5. GI Pathology services with expertise in interpretation of piecemeal colonic ER 6. Access to a colorectal MDT for discussion of cases found to have early SMI 7. Well written and informative post-procedural instructions for patients to be given at discharge	11/5/2017 3:35 AM
8	1. Nurses trained in using all the equipment described above 2. Availability of adequate time slot for the procedure (dedicated lists?). ER practitioner to gauge time needed depending on lesion characteristics 3. Availability of surgical and radiological back up in the event of a complication	11/5/2017 2:14 AM
9	- registered nurse for endoscopy - registered nurse for sedation/anesthesia - clerk - registered nurse for recovery - histopathology department	11/3/2017 1:22 PM
10	experienced therapeutic nurse, second nurse in room - this is a minimum. Experienced recovery nurse outside post-procedure. Anaesthetist or anaesthetic assistant if propofol deep sedation and anaesthetist plus + theatre assistant (ODA) if intubation required.	11/3/2017 11:35 AM
11	dedicated ER list with dedicated physicians and specifically trained nurses. One nurse or sedation specialist to take care of the patient, one nurse to assist with procedure, technician (optional). Recovery room, planning desk	11/1/2017 10:54 AM
12	Nurses trained in all accessories needed. Familiarity with long and complex procedures. Capable of managing staff if complication arises. Competent at recording polyp details (site, size, classification etc) when multiple resections.	10/31/2017 10:19 PM