

Standard Operating Procedure (SOP)

SOP Title	Process to follow when moving patients' medical notes in and out of the Gynae Consulting rooms in OPD (including Colposcopy) and GATU Process to follow when checking patient specimens following a procedure in OPD (including Colposcopy) and GATU procedure		
SOP Number	041		
Care Group	Women and Children's Care Group		
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Effective Date	6 th November 2023	Review Date	November 2026
Author	Lynn Atkin		
Approved by	Gynaecology Governance meeting		
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Distribution	Gynaecology medical teams and OPD/GATU nursing teams		
Location	Gynaecology Services		

Document Control				
Version	Date	Author	Status	Comments
1	June 2016	Lynn Atkin/Mr M Underwood/Tracy Rowson	Final	
2	June 2017	Lynn Atkin/Steph Roberts	Approved	Updated in response to Datix incident
2.1	September 2018	Lynn Atkin	Approved	Reviewed with no changes – date extended
2.2	September 2018	Lynn Atkin	Approved	Minor changes to Appendix 1 – additional comment lines
3	6 th November 2023	Reviewed by Holly Hardiman	Approved	Full review. Ratified at Gynae Governance.

SOP Objectives	<ul style="list-style-type: none"> To ensure the safe movement of patients medical records in/out of clinic rooms To ensure the correct process is followed when checking the labelling of specimens and forms in the OPD/GATU setting
Scope	To ensure zero errors when labelling specimens (including form and specimen pot).
Performance Measures	<ul style="list-style-type: none"> Review of Datix reporting system

Number	Brief	Responsibility
1	The Gynae Services Procedure Checklist needs to be undertaken at the beginning of each session and with each individual patient consultation if there is a plan to undertake an invasive procedure. (Appendix One)	Nursing and Medical team
2	Only the relevant set of medical notes for patient undergoing consultation and/or procedure should be in the clinic room at any one time	Nursing and Medical team
3	All specimens and previous patient data including medical notes must be removed from the clinic room before the next patient enters the room	Nursing and Medical team
4	Process for checking specimens: <ul style="list-style-type: none"> All specimens will be checked by two members of staff The specimen will be verbally checked between two Nursing staff members and the patient. The check will include cross reference of the patient's detail on the specimen/s and the patient label on the specimen form against the patient's medical records. The check will include patients name, date of birth and registration number. For Colposcopy and Hysteroscopy – the first checker will be a Registered Nurse 	Nursing and Medical team
5	The checking of specimens must be undertaken/ completed by two members of staff for each individual specimen	Nursing team
6	Training and completion of the training record documentation will be led by the Operational manager for OPD/GATU (Appendix 3)	Operational manager for OPD/GATU
7	Failure to adhere to the above may result in disciplinary action.	Nursing and Medical team

Gynae Services Procedure Safety Checklist (V4– Sep 2019)

Confirmed with doctor and nurses present in the room prior to starting the procedure

Chaperone: ☐ Accepted ☐ Declined

Date: ____/____/____ Time: ____:____

Name: _____

Signature: _____

Location: ☐ GATU ☐ GOPD ☐ Colp ☐ GW

Patient Label: _____

To the Surgeon

Are there any unusual or critical events anticipated?

No ☐ Yes _____

To the Nursing Team

Has sterility been confirmed?

Yes ☐No ☐ Action taken: _____

Are there equipment issues or any concerns?

No ☐Yes ☐ Action taken: _____

At the end of procedure the Nurse verbally confirms:

Completion of:

Name of procedure recorded Yes ☐ No ☐ N/A ☐Instruments count correct Yes ☐ No ☐ N/A ☐Swabs & cotton balls count correct Yes ☐ No ☐ N/A ☐Needle & blade count correct Yes ☐ No ☐ N/A ☐Specimen labelling (read specimen labels aloud, including patient's name) Yes ☐ No ☐ N/A ☐

Specimen checked by:

Name & Signature 1. _____

Name & Signature 2. _____

Any equipment problems to be addressed?

Yes ☐No ☐N/A ☐

If yes, please detail _____

To the Surgeon

Are there any concerns for recovery management of this patient?

No ☐Yes ☐

**ANY ADDITIONAL COMMENTS
PLEASE COMPLETE ON THE BACK OF THIS FORM**

The following questions are to be directed to the patient

Can you confirm:

- Your name
- DOB
- What procedure you are expecting to have today.
- Have you given consent?
 - Yes ☐ If yes, is this verbal consent ☐ or written consent ☐
 - No ☐
- Have you been informed of the risks, and benefits of the procedure?
 - Yes ☐ No ☐

Are you, or is it possible that you are, pregnant?

No ☐Yes ☐ If yes, consultant input required

N/A Post Menopause

N/A Other Reason _____

Do you have any known allergies?

No ☐Yes ☐ detail: _____

Are you on any anticoagulant therapy such as Warfarin, Tinzaparin, Dabigatran Etexilate, Apixaban, Edoxaban, Rivaroxaban or Clopidogrel?

No ☐Yes ☐ If yes, consultant input required

Surgeon to answer the following questions

Is there risk of excessive bleeding?

No ☐Yes ☐ If yes, surgeon input required

Are antibiotics required?

No ☐ Yes ☐If yes, have they been prescribed and given? Yes ☐

Is appropriate resus equipment available if needed?

Yes ☐No ☐ If no, do not proceed with case

Nursing Staff signature _____ Print name: _____

Surgical Staff signature _____ Print name: _____ GMC Number: _____

Additional comments

This image shows a single sheet of white paper with horizontal ruling lines. The lines are evenly spaced and run across the width of the page. There are no margins, text, or other markings on the paper.

Patients Requiring LocSSIPs:

- Procedures
 - Novasure Ablation
 - Myosure Polypectomy
 - Hysteroscopy
 - Essure Hysteroscopic Sterilisation.
 - Colposcopy.
 - Removal and insertion of IUCD & IUS
 - Out Patient Cystoscopy.
 - Drainage/incision of a Bartholin's / labial Abscess
 - Suturing of a wound
- Biopsies
 - Cervical Smear
 - Cervical, vaginal or vulval biopsy
 - Endometrial Biopsy (Pipelle)
 - Removal of endo-cervical Polyps.
- Removal of Products of Conception