PERI-OPERATIVE MORTALITY REVIEW MINISTRY OF HEALTH MALAYSIA (SURGICAL FORM. V5)

INTRODUCTION

This form is to be filled for all deaths occurring within total length of hospital stay following a surgical or gynecological procedure performed under general or regional anesthesia. Also included are death in operation theatre prior to the induction of anaesthesia.

CASE PROFILE

		POMR (COORDINATOR		
Name of Hospital			Case Code		
Date of Birth			Date of Mortality		
Date of admission			Ethnicity		
Gender	Male Female				
Age	Years	Months	Days		
Date of form issued					
Co-ordinator's Initial					
Primary Department		PRIMARY	DEPARTMENT		
Department(s)	General Surg	ery	Paediatric Surgery		
involved in the patient management	Cardiothoracic surgery		Urology		
,g	ICU/ HDW/ CCU		Anesthesiology		
	Plastic Surge	ry	Gynecology		
	eartment (s) General Surce Cardiothora ICU/ HDW/ Plastic Surge Obstetric Ophthalmole Neurosurgic		Orthopedic		
	Ophthalmolog	ЭУ	ENT		
	Neurosurgical		Endocrine surgery		
	Vascular surg	jery	Emergency & Trauma		
	Medical				
	Others				

		Р	re-operat	ive status				
Co-morbid Factor	Diabetes	Mellitus		Coronar	ry Artery Disease			
	Malignar	псу		Cerebro	Cerebrovascular accident (CVA)			
	Hyperter	nsion		Left Ven	tricular dysfunction			
	Heart Fa	ilure		Coma				
	Severe I	Head Injury		Chronic	Lung Disease			
	Chronic	Liver Disea	ise	Chronic	Chronic Kidney Disease			
	AIDS			Valvular	Heart Disease			
	Uncontro	olled Asthm	ıa	Anaemi	a			
	Others							
Risk Factor	Prematu	rity		Smoking	Obstructive Sleep	o Apnoea		
	Cachexia	a		IVDU	Cardiac Arrhythm	nia		
	Obesity			Bed-ridden				
	Dehydra	tion		Hypovolaemia				
	Congeni	tal abnorm	alities	Severe Sepsis				
	Others							
Blood Pressure	Systole		mmHo	g	Diastole	mmHg		
Pulse Rate		bpm	Temp	'C	Respiration	Breath/mir		
Weight		Kg						
Birth weight*		K	g Ge	estational Age	Full term			
			(A	t Birth)	Pre term	weeks		
Signs on admission								
Jaundice	Pale	De	hydrated	Cachexic	Cyanosed			
Intubated	Others							
GCS for Head Injury / 0	Coma :							
Eyes (/4)		Verb	oal (/5)		Motor (/6)			
Total GCS (/15)		T C						
For Trauma, significant injury sustained								

Instruction: Click on the Calculate RTS button to get the proper RTS value

Revised Trauma Score (if applicable)

% Probability of Survival

Investigations

FBC	On Admission			Pre-operative	
Hb		g/dl	Hb		g/dl
TWC		x10³/μL	TWC		x10³/µL
Platelet		x10³/μL	Platelet		x10³/µL
Renal Profile	On Admission			Pre-operative	
Na+		mmol/L	Na+		mmol/L
K+		mmol/L	K+		mmol/L
Urea		mmol/L	Urea		mmol/L
Se. Creatinine		µmol/L	Se. Creatinine		μmol/L
Blood Sugar	On Admission			Pre-operative	
RBS		mmol/L	RBS		mmol/L
Coagulation Profile	On Admission			Pre-operative	
INR		Ratio	INR		Ratio
PT		Sec	PT		Sec
APTT		Sec	APTT		Sec
	On Admission			Pre-operative	
ABG			ABG		
Albumin		g/dL	Albumin		g/dL
Lactate		mmol/dL	Lactate		mmol/dL
	On Admission			Pre-operative	
ECG	Normal			Normal	
	Abnormal			Abnormal	
Details			Details		
X-rays / imaging	On Admission			Pre-operative	
Details (If applicable)			Details (If applicable)		

	On Admission	on		F	re-operative	
Details			[Details		
ASA Category						
			FIRST OPERA	TION		
	If more than 1	surgery	performed, kindly i	ndicate in the narrative	report	
Date of First Operation]			
Time started				Time ended		
Operation category	Elective			Type of anesthesia	LA	
	Emerger	псу			GA	
					Regional	
					Other	
Pre-Operative diagnosis						
Post-Operative diagnosis						
Operative Procedure						
Number of surgery during this admission before mortality						
Surgeon Status						
Consultant	Spe	ecialist	Clini	cal Specialist (Under Ga	zzettement)	
МО	НО					
Supervisor Informed?	Yes	No				
Location of	In OT		In Hospital	At Home		
Supervisor	Not Avai	lable				

Consultant		Spe	cialist		
Clinical Specialist (l	Jnder Gazzette	ement) MO			
НО		AMO	0		
Intra-operative complica	tions?				
None	1	Excessive Bleeding	j (Contamination	1
Other organ injury	1	Hypotension	A	Anesthesia ad	lverse event
Others					
		POST OPERA	TIVE CARE		
Managed in ICU/	Yes	No	Ventileted Re	ot Op?	Yes
HDW	162	NO	Ventilated Pos	st-Op :	No
Post-Op Complication		Llama Aanadan		Dia adia a	
None		Hypotension		Bleeding	
Nausea/Vomiting Pneumonia		Reintubation		Atelectasis Ileus	5
Anastomotic Leak		Hypothermia Sepsis			ite Infection
Wound Breakdown		Multi-organ Failur	·e	_	thrombophlebitis
DIVC		Deep Vein Throm		-	/ Embolism
CVA		Pressure Ulcer	20010	-	ary Retention
		Post Spinal Head	ache		n Reaction
Adverse Drug React	ion	' Seizures		Others	
		FINAL O	PERATION		
Date of Final					
Operation					
Time started			Time e	nded	
Operation category	Elective		Type of a	nesthesia	LA
	Emergency	•			GA
					Regional
					Other
Pre-Operative diagnosis					
Post-Operative diagnosis					
Operative Procedure					

Anaesthetist Status

Surgeon Status

Consultant Specialist Clinical Specialist (Under Gazzettement)

MO HO

Supervisor Yes No

Informed?

Location of In OT In Hospital At Home

Supervisor Not Available

Anaesthetist Status

Consultant Specialist

Clinical Specialist (Under Gazzettement) MO
HO AMO

Intra-operative complications?

None Excessive Bleeding Contamination

Other organ injury Hypotension Anesthesia adverse event

Others

POST OPERATIVE CARE

Managed in ICU/ Yes No Ventilated Post-Op? Yes

HDW No

Post-Op Complication

None Hypotension Bleeding
Nausea/Vomiting Reintubation Atelectasis

Pneumonia Hypothermia Ileus

Anastomotic Leak Sepsis Surgical Site Infection

Wound Breakdown Multi-organ Failure Superficial thrombophlebitis

DIVC Deep Vein Thrombosis Pulmonary Embolism

CVA Pressure Ulcer Acute Urinary Retention

Renal Failure Post Spinal Headache Transfusion Reaction

Adverse Drug Reaction Seizures Others

DEATH

Place of Death

Wad ICU/HDW OT/Recovery room

Post Mortem? Done Not Done

Summary of Post Mortem findings (If post-mortem done)

Cause of Death

Narrative Report

Give a summary of the sequence of events leading to and contributing to the death.

Highlight the following points:

- a) Presenting signs and symptoms
- b) Factors that led to the deterioration and death of the patient.

DO NOT WRITE NAMES OF PERSONS INVOLVED

Death Cate	egory :							
1	2	3	4A	4B	5	6	7	
Date								
Place your	attachmen	its here :						
		L						

Comments by Head of Department/Unit or Specialist In-charge Highlight if there were any: i. Inappropriateness of treatment ii. Delays or problems during the management iii. Areas that could have been improved Death Category: 1 2 3 4A 4B 5 7 If you were to manage a similar case in the future, suggest how would you do it differently for a better outcome? No Different Don't Know Possible changes in management that could have given a better outcome

Date
HOD's
Initial

Please tick under which category this case is most appropriately discussed (DRG)

PaedsNeuroOrthoTraumaCardiothoracicGeneral SurgeryO&GOthers

Anaesthetist Form Required?

Yes

No

TO BE FILLED IN BY POMR ASSESSORS ONLY

Comments by Assessor

Death Category:

1

3

4A

4B

5

6

7

Contributory Factors in POMR

Anaesthetic

Pre-operative

Inadequate assessment

Inadequate optimisation of pre-existing medical / surgical condition

Lack of supervision / inappropriate grade anaesthetist

Weakness of organising system

Fatigue

Intra-operative

Inappropriate technique

Lack of skill

Inadequate management of anaesthetic complications

Inappropriate fluid management

Inappropriate drug selection / administration

Adverse drug reaction

Equipment failure

Poor reversal

Inadequate facilities / assistance to cope with crisis

Post-operative

Inadequate monitoring in recovery room

Failure to recognise need to provide continued post-operative monitoring / intervention in HDU / ICU

Failure to provide post-operative care due to shortage of ICU beds

Inappropriate post-operative management in HDU / ICU

<u>Surgical</u>

Pre-operative

Inadequate assessment

Inadequate optimisation of pre-existing

medical / surgical condition

Lack of supervision

Inadequate facilities

Delay in surgery

Inappropriate decision

Intra-operative

Inappropriate procedure

Lack of supervision

Inadequate skill

Inadequate facilities

Post-operative

Inappropriate post-operative management

Inadequate monitoring

Failure to recognise complications early

Inadequate facilities for management of critically-ill patients

TO BE FILLED IN BY POMR ASSESSORS ONLY

Committee Decision

Preventable Death

Non Preventable Death

Assessors comment

Date