

# Gynaecology Emergency Admission Documentation

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## Aims and Objectives

- The clerking document is the essential starting point of each admission
- Proformas are often used for this purpose
- In our trust, some departments were successfully using proformas, but in the gynaecology department, a simple continuation sheet was used
- Compared to a proforma, continuation sheets are difficult to locate in the notes, and do not contain any speciality-specific 'prompts'
- We wanted to create a proforma and to objectively assess whether documentation improved**

## Method

We created our own standards:

RCOG guidelines state the following should be documented for unscheduled admissions [1]:

- A working diagnosis
- A plan
- A consultant review

We added to these, with consultant input, to create 21 'Essential Clerking Criteria'.

We retrospectively analysed 25 emergency admission clerkings from July 2018.

The proforma was created, peer-reviewed, and implemented October 2018 – April 2019.

25 emergency admissions from May 2019 were then retrospectively analysed and held to the same standards.

### 21 Essential Clerking Criteria

- Clerking easy to find
- Responsible consultant
- Referral source
- Time and date
- Presenting complaint
- History of presenting complaint
- Past medical history
- Past surgical history
- Obstetric history
- Contraception
- Last Menstrual Period
- Sexual History
- Systems review
- Social history
- Abdominal exam
- Pelvic exam
- Observations
- Blood results
- Working diagnosis
- Management plan
- Consultant review

GYNAECOLOGY CLERKING PROFORMA

|                      |                |
|----------------------|----------------|
| Name:                | Date:          |
| Date of Birth:       | Time:          |
| Hospital ID:         | Referral from: |
| NHS number:          | Location:      |
|                      | Clerked by:    |
|                      | Consultant:    |
| Presenting Complaint |                |
| History              |                |
| Obstetric            |                |
| Gynaecological       |                |
| Sexual               |                |
| Past Medical         |                |
| Past Surgical        |                |

GYNAECOLOGY CLERKING PROFORMA

|   |                |
|---|----------------|
| Family History  |                |
| Drug History  | Allergies      |
|   | Social History |
| Systems Review  |                |
| Abdominal Exam  |                |
| Pelvic Exam   |                |
| HVS <input type="checkbox"/> Chlamydia/Gonorrhoea <input type="checkbox"/> Chaperoned by: _____ |                |

GYNAECOLOGY CLERKING PROFORMA

|   |            |
|---|------------|
| Observations                                | NEWS:      |
| RR sats HR BP Temp                          |            |
| Bloods                                      | Urinalysis |
| WCC Bil B-HCG                               |            |
| Hb ALP                                      |            |
| Plt ALT Alb                                 |            |
| Na CRP                                      |            |
| K ESR                                       |            |
| Urea Lactate                                |            |
| Cr Fib Blood Group                          |            |
| Impression                                  |            |
| Plan  |            |
| Clerked by: _____ Grade: _____ Bleep: _____ |            |

GYNAECOLOGY CLERKING PROFORMA

|   |                       |
|---|-----------------------|
| Radiology   |                       |
| Senior Review   | Date _____ Time _____ |
| Clinician   |                       |
| Grade   |                       |
| Anti-D needed? Yes <input type="checkbox"/> No <input type="checkbox"/> Datix required <input type="checkbox"/> VTE assessment <input type="checkbox"/> |                       |

The Proforma

## Results

Prior to the proforma, the mean documentation of any criteria was 50.8%. With the proforma, this rose to **78%**. All criteria improved, bar sexual history.



|                                 | Phase 1      | Phase 2      |
|---------------------------------|--------------|--------------|
| Clerking easy to find           | 0.6          | 1            |
| Responsible consultant          | 0            | 0.68         |
| Referral source                 | 0.12         | 0.92         |
| Time and date                   | 0.84         | 0.88         |
| Presenting complaint            | 0.84         | 0.84         |
| History of presenting complaint | 0.92         | 1            |
| Past medical history            | 0.48         | 0.96         |
| Past surgical history           | 0.28         | 0.88         |
| Obstetric history               | 0.6          | 0.92         |
| Contraception                   | 0            | 0.6          |
| Last Menstrual period           | 0.32         | 0.8          |
| Sexual History                  | 0.92         | 0.44         |
| Systems review – bowels & urine | 0.32         | 0.36         |
| Social history                  | 0.08         | 0.44         |
| Abdominal exam                  | 0.72         | 0.96         |
| Pelvic exam                     | 0.72         | 0.76         |
| Observations noted              | 0.68         | 0.84         |
| Bloods noted                    | 0.48         | 0.6          |
| Impression/Working diagnosis    | 0.4          | 0.92         |
| Management plan                 | 0.96         | 1            |
| Consultant review               | 0.4          | 0.6          |
| <b>Average score</b>            | <b>0.508</b> | <b>0.780</b> |

## Conclusions

- Clerking proformas can significantly improve the quality of documentation
- Speciality-specific prompts are useful, particularly in busy environments where documentation needs to be time-efficient
- The rotation of junior doctors can bring about positive change as ideas can be transferred between departments
- Junior doctors can make an objective and measurable difference**

**References** 1. Rcof.org.uk. (2016). Providing Quality Care for Women. [online] Available at: <https://www.rcog.org.uk/globalassets/documents/guidelines/working-party-reports/gynaestandards.pdf> [Accessed 9 Oct. 2019].