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| Date: [dd/mm/yyyy] |

Chief Health Officer

Department of Health

PO Box 8172

Perth, WA, 6849

Dear Sir/Madam:

Re:

**CONFIDENTIAL REPORT TO THE STATE INVESTIGATOR**

**ANAESTHETIC MORTALITY COMMITTEE**

Patient label (If available)

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| ABSOLUTE REPORTING REQUIREMENTS: *Basic information* |
| Patient Name |  |  |
| Address |  |  |
| Date of Birth |  |  |
| Gender  |  |  |
| URN |  |  |
| Hospital/Site |  |  |
| Operation |  |  |
| Patient’s ASA: 1-5 (E) |  |  |
| Date of Operation |  |  |
| Time anaesthetic commenced |  |  |
| Time anaesthetic ended |  |  |
| Date deceased |  |  |
| Time deceased |  |  |
| Duration from induction to death |  |  |
| Anaesthetist/s |  | Name plus details re:SpecialistTrainee (level)GPNon-specialistIMGS |
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|  |
| Surgeon/s /proceduralist |  | Name plus details re:Specialist (Specialty)TraineeGP/ non-specialistVMO/ IMGSRMO/ Intern dentist |
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|  |
| Presumed cause of death |  |  |
| Location of Procedure  |  | (Induction room, theatre, recovery procedure room, A&E, medical imaging, endoscopy unit, cardiology, ICU, HDU, general ward, labour ward, day surgical unit, Out of hospital site (private rooms, dental surgery, non-hospital Day surgery unit), other) |
| Location of Death |  |

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| ABSOLUTE REPORTING REQUIREMENTS: *Summary of case* |
| See guidelines below, please include timing of events. Use extra pages as necessary |
| **Pre-operative Assessment and Management** |
| **Intraoperative details:** |
| **Post-operative details:** |
| **Anaesthetic assistance:** |
| **Other issues, information or comments:** |

Yours sincerely,

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| Name/Contact details:**Extra information:** |

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| Guidelines for completing a detailed summary of case:  |
| *Details to include* (*where relevant.)*  |
| **Preoperative assessment** * Date of admission
* Comorbidities, past surgical history. Previous anaesthetic problems. Other relevant history. Allergies
* Fasting status
* Patient height/weight or BMI
* Preoperative condition/observations
* Presumed diagnosis
* Relevant investigations/abnormal results
* Advanced care planning, NFR (Not For Resuscitation) orders
 |
| **Preoperative management*** Resuscitation
* Monitoring
* Regional analgesia/ pain management
* Other management
* Premedication/ Other Drugs
 |
| **Intraoperative details*** Type of anaesthetic (GA, sedation, regional, local)
* Regional or local anaesthesia -details
* Positioning
* Monitoring (note any issues with monitoring)
* Drugs – (all drugs given: name, dose, route, timing)
* Airway management - (Airway difficulties, pre-oxygenation, cricoid pressure, equipment used.)
* Ventilation type/management/circuit
* Intraoperative observations
* Intraoperative events (anaesthetic and surgical)
* Intraoperative investigations
* Fluid loss/fluid administration
* Intraoperative difficulties
	+ Cardiovascular/ Respiratory/ Equipment/ CNS
	+ Cardiac arrest (type – VF, VT, asystole, PEA)
	+ Anaphylaxis,
	+ MH
	+ Other
* Resuscitation management
* Case/specialty specific issues (e.g. tourniquet time/ clamp time)
 |
| **Post-operative details*** Location of Immediate transfer to – recovery/ ICU/HDU/ inter-hospital, other (specify)
* ICU/HDU planned admission Y/N
* Issues in recovery (CNS, neuromuscular, temperature, cardiovascular, respiratory/airway, bleeding, vomiting)
* Postoperative observations/ monitoring
* Postoperative management
* Postoperative investigations
* Duration of stay in recovery
* Ward or ICU management and issues
 |
| **Anaesthetic assistance** * Qualification/Type of assistant.
* Availability of assistant
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| **Other information** * Underlying pathology/ findings at operation
* Coroner’s report findings
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| **Other issues** * Organisational
* Communication issues
* Fatigue
 |
| **Other comments** |

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| American Society Of Anaesthesiologists (ASA) Physical Status Classification |
| 1 | A normal health patient |
| 2 | A patient with mild systemic disease |
| 3 | A patient with severe systemic disease |
| 4 | A patient with severe systemic disease that is a constant threat to life  |
| 5 | A moribund patient who is not expected to survive without the operation |
| E | Patient requires emergency procedure |