QUALITY AND RISK MANAGEMENT IN HOSPITALS: AUDIT OF SURGICAL ANTIBIOTIC PROPHYLAXIS

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BACKGROUND

Infection is a risk for any surgery. The aim of surgical antimicrobial prophylaxis (SAP) is to reduce the risk of surgical site infection. Its prescription must obey certain rules, established on the basis of numerous studies on this subject.

Indeed, the SAP, whenever it is recommended, must use an antibiotic adapted to both the bacteriological target and the relevant surgery, in order to obtain effective tissue concentrations on the potential site of infection throughout the operation. Compliance with these rules is an integral part of the quality improvement policy and the safety of care.

PURPOSE

Our Study aims to evaluate, through a prospective audit, compliance with SAP recommendations in the operating rooms as part of quality and risk management at Mohammed V Military Teaching Hospital.

MATERIAL AND METHODS

This was a prospective study of the SAP conformity for all patients admitted for surgery in orthopaedics-traumatology, gynaecology, urology, visceral surgery, neurosurgery, ophthalmology, otolaryngology and maxillofacial surgery, over the period 28 September 2015 to 11 October 2015. SAP compliance was evaluated by comparison with the repository of the French Society of Anaesthesia and Intensive Care (2010 version), and objectivised by a combined overall compliance criterion (indication, choice of molecule and posology).

RESULTS

Among the 308 cases that were included over the study period, 177 patients received a SAP (57%).

Figure 1. Overall SAP compliance percentage (n=308)

Figure 2. Compliance percentage in patients who received a SAP (n=177)

Figure 3. Compliance percentage in patients who did not receive a SAP (n=131)

Figure 4. Antibiotics used for SAP (n=177)

Figure 5. SAP compliance by services in patients who received a SAP (n=177)

CONCLUSION

SAP recommendations are imperfectly applied, in particular concerning the choice of antibiotic to be administered and the establishment or not of SAP. Efforts must be pursued in terms of adherence to these recommendations, and continually evaluated to improve the quality and to master the risk at our institution.

REFERENCES


KEYWORDS: Quality management, risk management, hospital, surgery, antibiotic prophylaxis.