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# BIARGS

British & Irish Association of Robotic Gynaecological Surgeons

GYNAECOLOGICAL Robotic SURGERY:Minimum dataset for registration and recertification"Mandatory audit for new technique"BIARGS NOV 2019

Please ensure All mandatory* fields are completed
* Hospital 1 Name:
*Hospital 1 Name:
*Hospital 1 Name:
*Console Surgeon
*Robotic system
*12 month audit period (Start date/ /: End date/) *Meeting attended in last 3 years:
Date of Meeting//

\*Total number of robotic cases (TOTAL PATIENTS) undertaken as primary surgeon:

## Table 1: Procedures undertaken by Console surgeon

Procedure (one patient may have more than one procedure)	Number ( Zero and above)
Robotic procedure for BMI > 35	
Robotic procedure with mini-laparotomy for specimen removal	
Hysterectomy	
Radical hysterectomy (Wertheim's)	
Ovarian mass excisions	
Removal of retroperitoneal masses	
Excision of rectovaginal endometriosis	
Myomectomy	
Pelvic Lymphadenectomy or Sampling	
Para-aortic Lymphadenectomy or Sampling	
Trachelectomy	
Colposuspension	
Sacrocolpopexy	
Mesh removal	
Tubal reconstruction	
Other ( Please specify)	



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Table 2: Indication:

Indication (one patient may have more than one indication)	Number ( Zero and above)
*High BMI >35	
*Endometriosis	
*Fibroid uterus	
*Menstrual disorders	
*Pelvic mass	
*Frozen pelvis / previous surgery	
*Endometrial pathology / cancer	
*Cervical cancer	
*Ovarian cancer	
*Cervical Dysplasia	
*Cancer risk reducing surgery (Lynch Syndrome or BRAC gene career)	
*Prolapse	
*Incontinence	
*Mesh complication	
*Infertility	
Other (Please specify)	

 Table 3: Perioperative outcome (Intraoperative, postoperative and Late up to 3 months). One patient may have more than one complication

\*Complications: Yes/NO:

If Yes Total patient number with complication:

## Table 3a: Intraoperative Complications (complications during primary surgery)

Intraoperative Complications	Number (Zero and above)
*Anaesthetic problems: unplanned admission to HDU	
*Haemorrhage > 1 litre	
*Unexpected bowel injury:	
*Unexpected ureteric injury	
*Unexpected bladder injury	
*Unexpected vascular injury	
*Epigastric injury	
*Procedure abandoned	
*Unplanned Conversion to laparoscopy	
*Unplanned Conversion to laparotomy	
*Stoma due to bowel injury	
*Blood transfusion	
*Death (Please give more details on CEPOD into robotic surgery)	
Other (Please specify)	
Other ( Please include any Clavian Dindo 3 and above complication not	
listed above)	



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#### Table 3b: Late complications (any event up to 3 months post-surgery)

Postoperative Complications (Day 0 to 3 months)	Number (Zero and above)
*Return to theatre	
*Severe sepsis	
*DVT	
*Pulmonary embolism:	
*Blood transfusion	
*Pelvic haematoma /abscess:	
*Urinary tract leak	
*Bowel perforation	
*Vault Dehiscence	
*Unplanned readmission <30days	
*Death (Please give more details on CEPOD into robotic surgery)	
Other (Please specify)	
Other (Please include any Clavian Dindo 3 and above complication not	
listed above)	

### Table 4: Length of Stay (LoS)

*Days of discharge	Number ( Zero and above)		
Day 0			
Day 1			
Day 2			
Day 3			
Day 4			
Day 5			
Day 6			
Day 7 or more			

### Comments

SUBMIT online <u>www.biargs.org.uk</u> OR Email to: <u>biargsbiargs20@gmail.com</u>