



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/...../.....)

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

*Meeting attended in last 3 years :

Date of meeting/...../.....

Procedures undertaken by Console surgeon

Procedure (one patient may have more than one procedure)	Number (Zero and above)
Simple Hysterectomy	
Modified Hysterectomy	
Radical hysterectomy (Wertheim's)	
Ovarian mass excisions	
Removal of retroperitoneal masses	
Pelvic Lymphadenectomy or Sampling	
Para-aortic Lymphadenectomy or Sampling	
Trachelectomy	
Excision of pelvic endometriosis	
Excision of rectovaginal endometriosis	
Myomectomy	
Colposuspension	
Sacrocolpopexy	
Mesh removal	
Other (Please specify	



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Indication:

Indication (one patient may have more than one indication)	Number (Zero and above)
*Endometriosis	
*Fibroid uterus	
*Menstrual disorders	
*Pelvic mass	
*Prolapse	
*Incontinence	
*Endometrial pathology / cancer	
*Cervical cancer	
*Ovarian cancer	
*Cervical Dysplasia	
*Lynch Syndrome	
*High BMI >35	
Other (Please specify -----)	

Perioperative outcome

*Complication Yes/NO If Yes Total No:

Perioperative 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	
*Colostomy due to bowel injury	
*Ileostomy 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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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	
*Pulmonary embolism:	
*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-----)	

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

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SUBMIT online www.biargs.org.uk OR
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