FEELING DRAINED = FEELING BETTER! AUDIT OF HOSPICE PLEURAL ASPIRATION

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Background Hospice pleural aspiration has been undertaken for the last 25 years, following training by local chest physician. When the requirement for ultrasound (US) guided aspiration was introduced, a US machine was purchased and staff training undertaken. The British Thoracic Society issued guidance for pleural drainage in 2003 and standards were adapted for use in respect of pleural aspiration in hospice.

Method Retrospective review of all pleural aspirations undertaken over a three year period drawn from electronic clinical record. Documentation of the procedure was audited against 20 standards identified.

Results 36 procedures identified. 14 of 20 standards were 100% met; two met in 97% and two in 94%. Although pleural aspiration was always undertaken with a standard pleural aspiration kit with a small bore needle and 3 way tap, the documentation did not specifically say so. The consent form (one missing) did not contain the list of common complications, which were outlined on the leaflet about the procedure given to each patient. The procedure sometimes took place out of hours where symptom control demanded it. Post procedure – analgesia was not always prescribed, as it was often done as a day case and patients brought their own and observations were not recorded as per protocol in the two failed procedures.

Conclusions The template for procedure documentation has been adjusted to incorporate items which were not present; consent form and information leaflet rewritten to include same list of common complications; analgesia now routinely prescribed and offered, and use of patient’s own is documented; procedure adjusted to ensure that post-procedure observations completed even when procedure failed; anticoagulant administration and blood results documentation improved; standard rewritten to ensure that out of hours procedures should continue to take place when required for symptom management, but undertaken by most experienced clinician.

USE OF DIAGNOSTIC ULTRASOUND IN A HOSPICE AT HOME TEAM – A SERVICE EVALUATION

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Background Ultrasound is a diagnostic tool that can supplement clinical examination. Members of the Princess Alice Hospice medical team have attended a course which teaches clinicians how to use ultrasound to assess for the presence of ascites and whether the urinary bladder contains fluid. The hospice has purchased a portable ultrasound machine.