



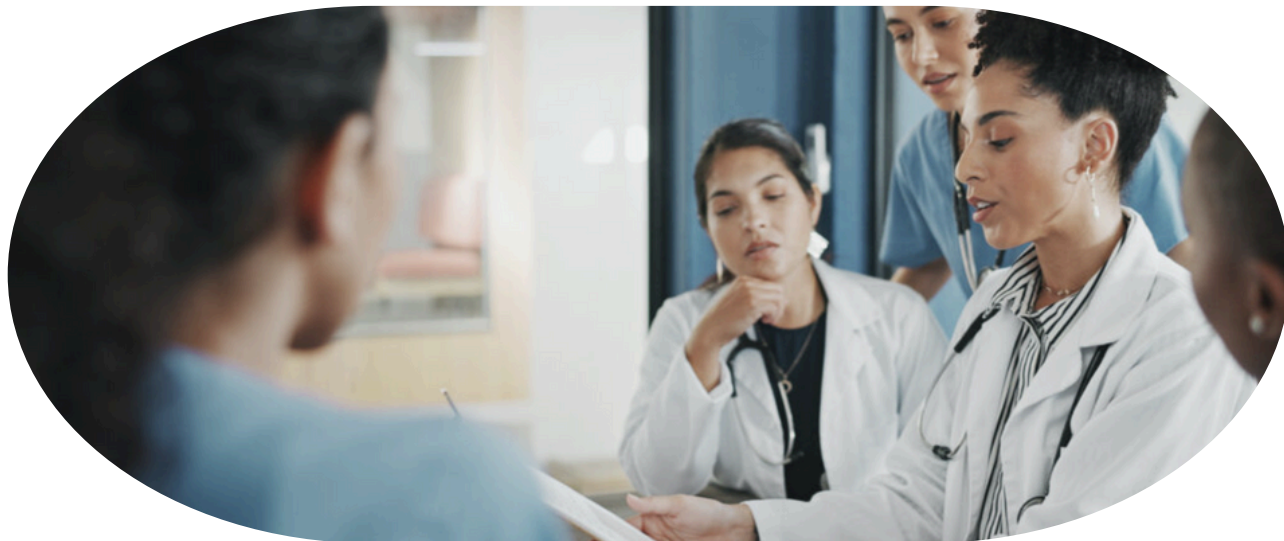
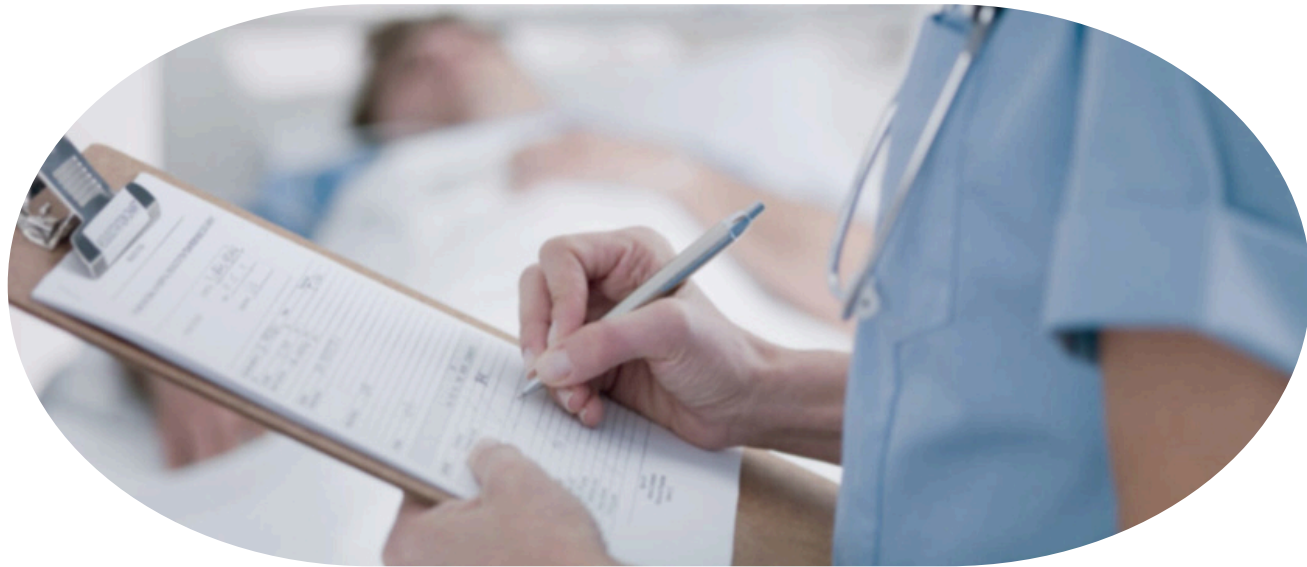
DOCUMENTATION, KPI'S & AUDIT IN ENDOSCOPY

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Objectives



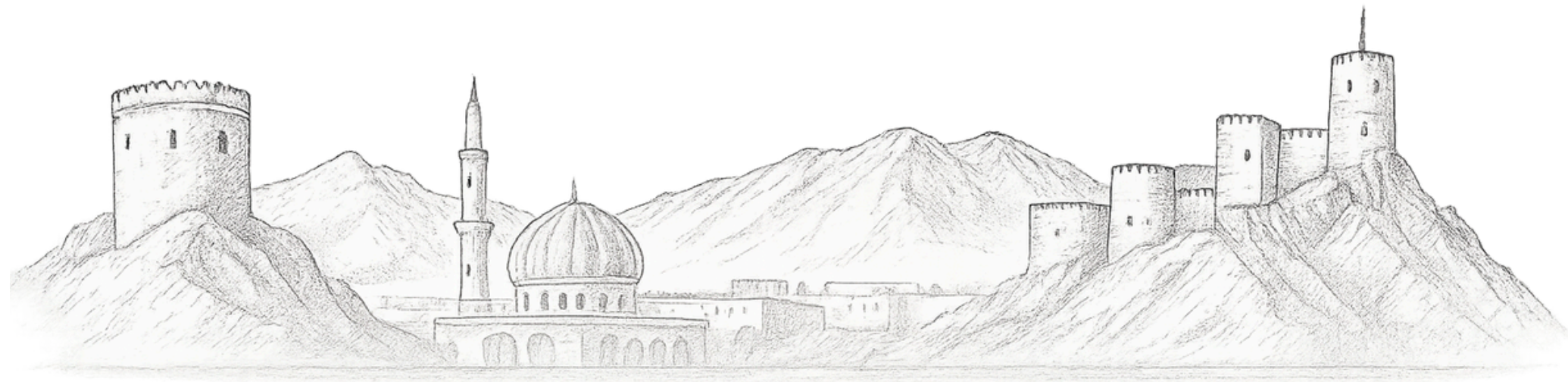
- 01 Understand key endoscopy documentation components.
- 02 Identify required photo-sets and sample labeling standards.
- 03 Learn the structure of reprocessing documentation.
- 04 Emphasis on accurate documentation
- 05 Explore nurse-driven KPIs impacting quality care.



Importance of Documentation

- To Ensure patient safety is the top most priority
- Supports quality improvements and audits
- Avoid sample errors and communication gaps
- Mandatory for health care accreditation (JCI, WEO, ACHSI)
- Protects staffs legal

Documentation = Protecting patients + protecting staff + improving quality



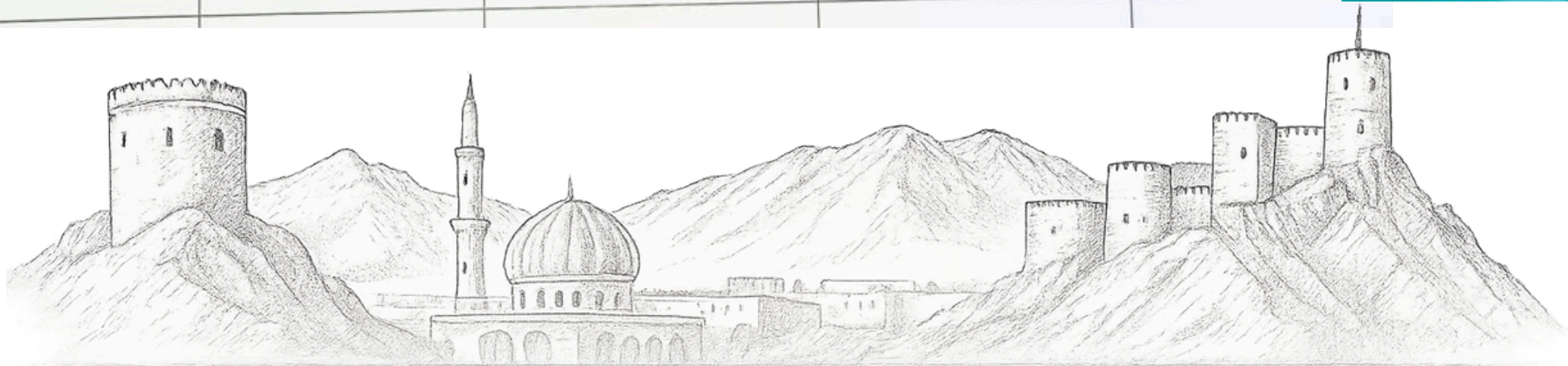
Principles of Effective Documentation

- Accurate, Complete
- Date and Time of each recording: 24 hours clock wise
- Correct spelling
- Use accepted terminology only
- Chart the record soon after the procedure, not before or delayed





Debriefing of patients schedule on 29/11/2025

SL NO	PATIENT DETAILS -PID NAME /AGE	PROCEDURE	INDICATION FOR PROCEDURE	PAST MEDICAL HISTORY	ANTICOAGULANTS	REMARKS
1	Mr.Mohammed AGE: 51 yrs\Female-1002	Colonocopy	Epigastric Pain , Chronic Diarreaah, Wt loss > 8kg	Previous HP positive . OGD done on 17/8/25 by Dr. adnan	Aspirin	NIL
2	Mariya Age- 22 yrs\Female 10004	OGD	Epigastric Pain mainly after food .	UbT positive Never had OgD	NIL	NIL
3	Suhailah Saif Age:33 yrs/Female 10005	Colonscopy	PR Bleed	Last scopy done in 31\8\25 was incomplete due to disease severity Cytomegalovirus reactive		NIL



Daily Check list






ENDOSCOPY ROOM DAILY CHECKLIST

1. Check cupboard (consumables & accessories)

Item	Available (□)	Remarks
Cold snare		
Hot snare		
Hybrid snare		
Polyp trap		
Diathermy pad		
Injector (gastric)		
Injector (colonic)		
Hemoclip ≤11 mm		
Hemoclip ≥11 mm		
Special clips (OTSC / Mantis / Resolution)		
Biopsy forceps (gastric)		
Biopsy forceps (colonic)		
Gloves (S, M, L)		
Surgical gown / yellow gown		
O ₂ face mask & nasal cannula		
Inco-pad / face shield		
Specimen containers & formalin		

2. Check top of trolley

Buscopan inj × 5		
Adrenaline 1:10 000 inj × 3		
Naloxone inj × 3		
glycerin solution		
Black dye / methylene blue/ Indigo carmine		

4. Check endoscopy tower & suction system


Item	Available (□)	Remarks
Water bottle connected		
Suction liner + tubing intact		
Yankauer suction tip available		
CO ₂ cylinder level checked		
Water irrigation bottle filled		
Air pump functioning		
Light source and camera head clean and functional		
Printer paper + ribbon available		
Keyboard, foot switch, and monitor cables secure		

5. Scope station (per procedure)

Item	Available (□)	Remarks
Scope model & serial logged		
Leak test done before procedure		
Scope lens clean, angulation check OK		
Channel irrigation check OK		
Scope rack & connectors clean and ready		



Endoscopy Check list

 Endoscopy checklist		Patient Identification:	
Date:	Time:		
Location: <input type="checkbox"/> RM 1 <input type="checkbox"/> RM 2 <input type="checkbox"/> RM 3 <input type="checkbox"/> RM 4			
Clinical Type: <input type="checkbox"/> MOPD <input type="checkbox"/> SOPD <input type="checkbox"/> Ward _____ <input type="checkbox"/> OPD			
Pre-Endoscopy Preparation:			
Item	Completed	Remarks	
T, P, BP, SPO2	<input type="checkbox"/> Yes <input type="checkbox"/> No		
Patient file, ID band, stickers	<input type="checkbox"/> Yes <input type="checkbox"/> No		
Consent form completed	<input type="checkbox"/> Yes <input type="checkbox"/> No		
Upper GI fasting from:	<input type="checkbox"/> Yes <input type="checkbox"/> No		
IV cannula in situ	<input type="checkbox"/> Yes <input type="checkbox"/> No		
Jewelry removed	<input type="checkbox"/> Yes <input type="checkbox"/> No		
Dentures / loose teeth	<input type="checkbox"/> Yes <input type="checkbox"/> No		
Driver/escort	<input type="checkbox"/> Yes <input type="checkbox"/> No		
Colonoscopy Bowel Prep:			
1. Movicol (2 sachets daily for 3 days)	<input type="checkbox"/> Yes <input type="checkbox"/> No		
2. Bisacodyl (2 tablets)	<input type="checkbox"/> Yes <input type="checkbox"/> No		
3. Choose one prep:			

Infectious Risk Screening:	
Infectious Disease: <input type="checkbox"/> HIV <input type="checkbox"/> Hep B <input type="checkbox"/> Hep C <input type="checkbox"/> Gastroenteritis <input type="checkbox"/> TB MDRO (colonization or infection with multidrug-resistant organisms): <input type="checkbox"/> MRSA <input type="checkbox"/> ESBL <input type="checkbox"/> VRE <input type="checkbox"/> CRE <input type="checkbox"/> Other: _____	Notes
Allergies & Medications:	
Allergies: <input type="checkbox"/> None <input type="checkbox"/> Opiates (e.g morphine, fentanyl,) <input type="checkbox"/> Local anesthesia (lidocaine spray)	
Antiplatelets: <input type="checkbox"/> None <input type="checkbox"/> Clopidogrel - Stopped: _____ <input type="checkbox"/> Aspirin - Stopped (if ampulectomy): _____	
Anticoagulants: <input type="checkbox"/> Warfarin - last INR: _____ Stopped: _____ <input type="checkbox"/> DOAC (e.g Rivaroxaban, Edoxaban, Dabigatran, Apixaban) Name: _____ Stopped: _____	
Intra-Procedure Checklist:	
Item	Notes
T, P, BP, SPO2	SPO2: _____ P: _____ R: _____ BP: _____
Procedure done	
Time	
Endoscopist	Dr: _____ Dr: _____ Dr: _____
Staff assisting	Staff: _____ Staff: _____ Staff: _____
Sedation	<input type="checkbox"/> Midazolam ____ mg <input type="checkbox"/> Fentanyl ____ mcg <input type="checkbox"/> Buscopan ____ mg <input type="checkbox"/> Other: _____
Biosv taken <input type="checkbox"/> Yes <input type="checkbox"/> No	Other findings/interventions:



Standard Photo-Sets

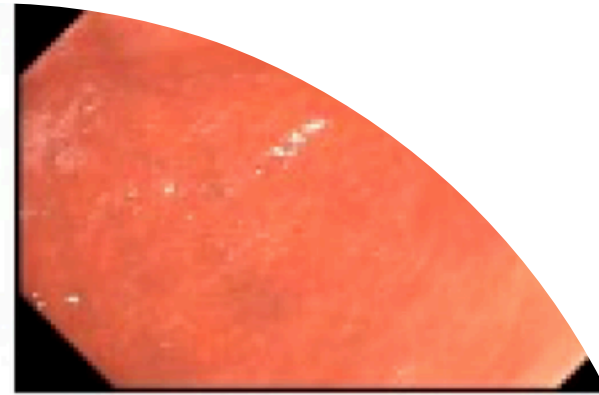
Photo-sets = visual evidence of safe and complete endoscopy.

What MUST be included:

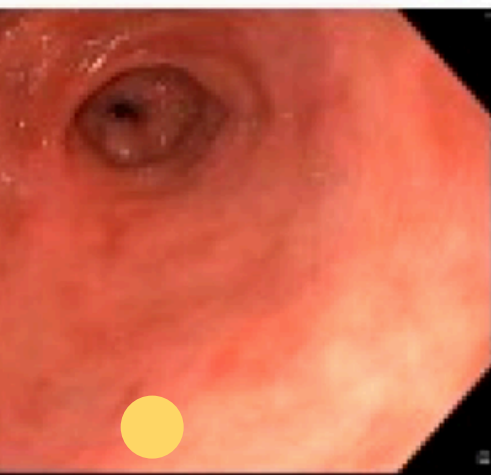
- 📄 Patient ID screen (Name, MRN, date/time)
- 📍 Anatomical landmarks (e.g., Z-line, fundus, antrum, D1/D2)
- 🩺 Pathology images (polyps, ulcers, inflammation)
- Intervention documentation (before & after treatment)



Duodenal Bulb



Body – Antrum Transition (



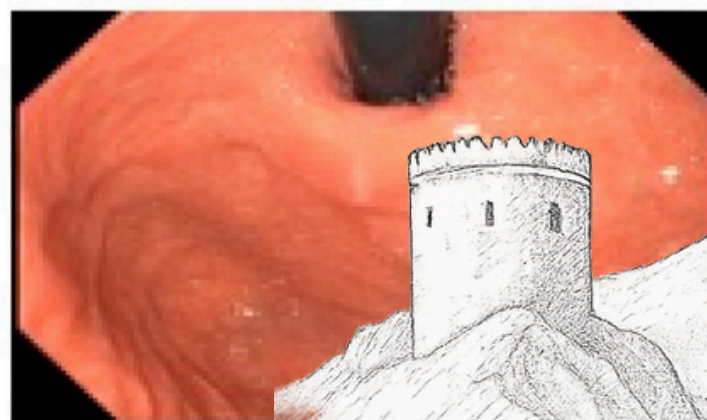
Antrum



Incisura



Pylorus



Fundus,



Specimen Documentation

Each biopsy or specimen **MUST** include:

- 👤 Patient name & MRN
- 🏷️ Site of biopsy (e.g., antrum, esophagus, duodenum)
- 🕒 Date & time collected

Why labeling matters:

Prevents mix-ups

Ensures correct diagnosis for the correct patient

Required by international safety standards



Reprocessing Documentation

- Scope serial no.
- Leak test result
- Cycle completion
- Technician's name and signature
- Record of ⚠ Any deviation (delays, failed cycles, missing steps)

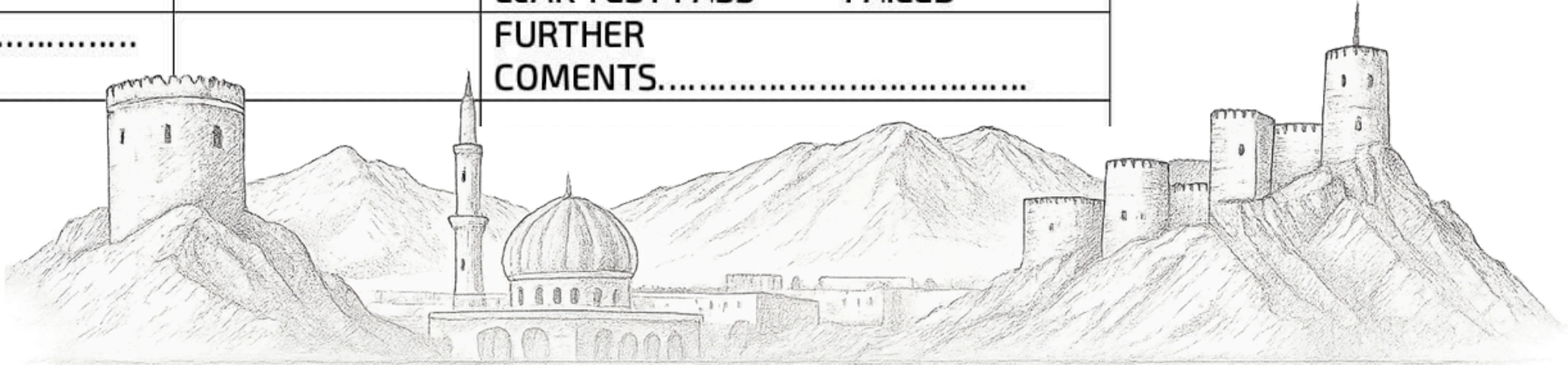
Why it matters:

- Ensures the scope is safe for the next patient
- Prevents infection transmission
- Supports accreditation compliance
- Provides legal traceability



FLEXIBLE ENDOSCOPE TRACKING CHART			
DATE OF THE PROCEDURE: TIME:		SPECIALITY : MEDI- SURG-	
LOCATION -ENOSCOPY ROOM 1 ROOM 2 ROOM 3 ROOM 4 ICU OT			
ENDOSCOPE DETAILS	MODEL /SERIAL NO	PRE-CHECKED BY	COMMENTS/ REMARKS
GASTROSCOPE			
COLONOSCOPE			
DUODENOSCOPE			
BRONCHOSCOPE			
TEE			
THERAPEUTIC SCOPE			
PEDIATRIC GASTROSCOPE			
PEDIATRIC COLONOSCOPE			
ENDOSCOPIC ULTRA SOUND			
ENTEROSCOPE			
ACTUAL PROCEDURE DONE:		REPROCESSED BY	
.....		LEAK TEST PASS FAILED	
.....		FURTHER COMENTS.....	
.....			
.....			

Tracking Chart



INCIDENT & NEAR-MISS REPORTING

Incident: any deviation from the regular practice

Near-Miss: Error caught before harm

Reporting Route:

- Identify the incident or near-miss
- Notify the charge nurse / supervisor
- Document in the reporting system.
- Review by Quality & Safety Committee
- Training to improve & avoid the reoccurrence

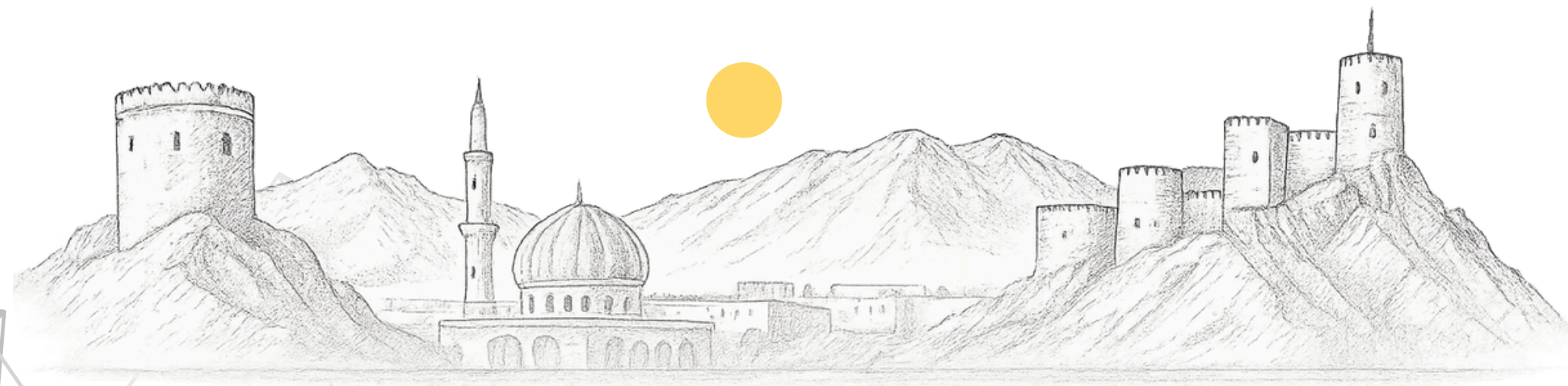
Why it matters:

- Learning tool, not punishment
- Improves patient safety
- Reduces future errors



KPI = Key Performance Indicator

→ A measurable value that shows how effectively the endoscopy unit and nursing staff are performing critical tasks.



Nurse-Influenced KPIs

Turnover Time

- Time taken to prepare the room between procedures & Measures efficiency and patient flow

Reprocessing deviations

- Deviations during cleaning or HLD cycles & Tracks safety & compliance with infection control

Equipment Issues/Malpractice

- Any delays caused by faulty or missing instruments & Indicates operational readiness



Nurse-Influenced KPIs

Photo-Set Completion Rate

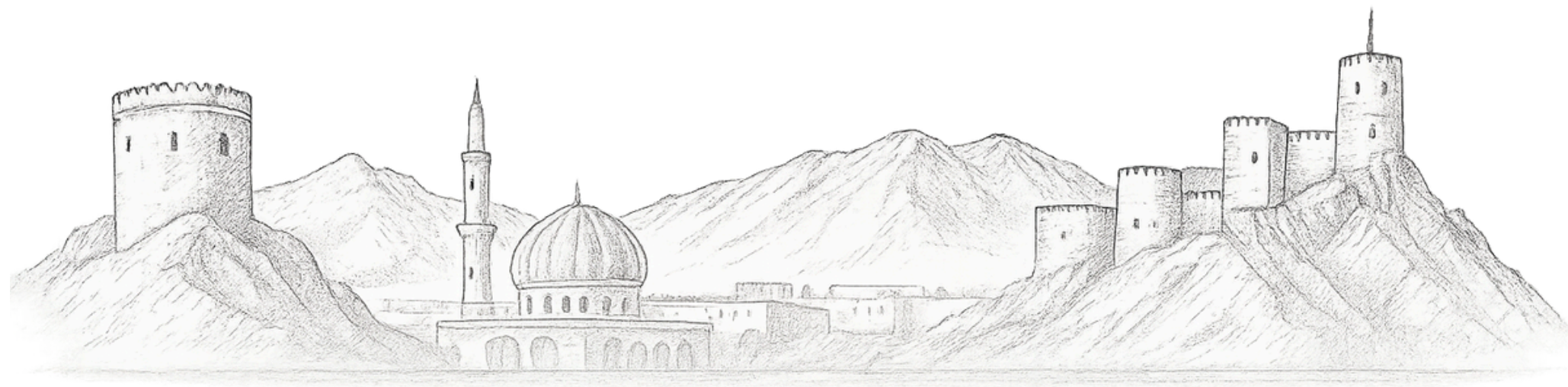
- Percentage of cases with full standard photo-set captured

Specimen handling Accuracy

- Correct labeling of biopsies, forms, and devices

Infection control practice

- Use of PPE, Hand hygiene etc





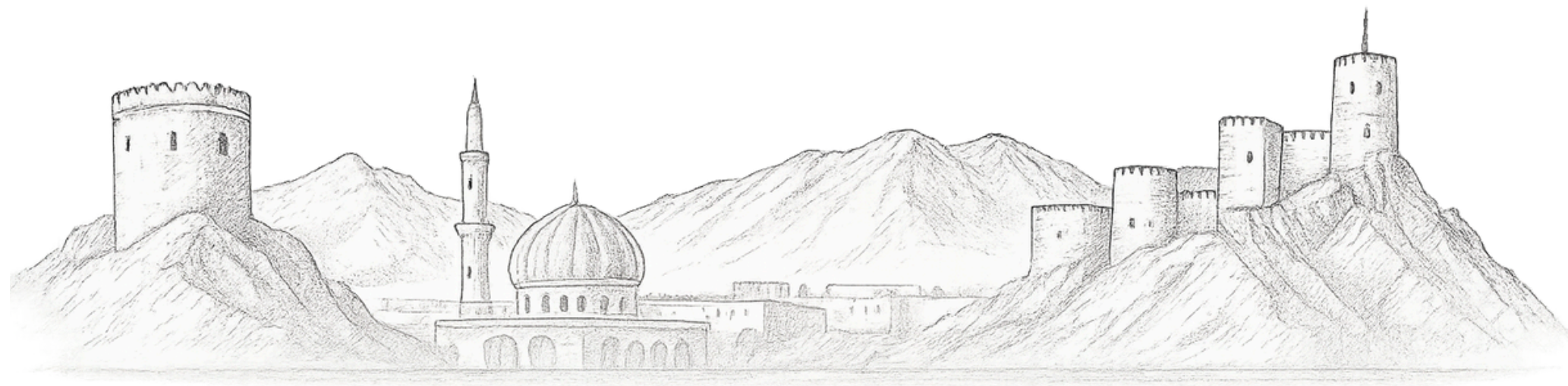
Why KPIs matters:

Shows efficiency, safety, and quality of care
Supports audits and accreditation



Key Message:

- **Nurse-driven KPIs = direct impact on patient safety and workflow efficiency.**





An endoscopy audit should cover pre-procedure checks, equipments, the intra-procedure "time out," and post-procedure verification.



Post procedure hand out/feedback

اسم المريض: الموظفين:

تاريخ الإجراء: طبيب: المساعد:

قد خضعت:

☐ تنظير المعدة

☐ تنظير القولون

☐ تصوير البنكرياس والقنوات الصفراوية بالمنظار

☐ التنظير الكبسولي

إجراء آخر:

الأدوية التي أخذتها:

☐ ميدازولام (مهدئ)

☐ ألفينتانييل (مسكن للألم)

نتيجة الفحص:

أخذ عينات من الغشاء المخاطي (خزعة)

إزالة الزوائد اللحمية

إجراء آخر:

.....

⚠ (بالنسبة لخزعات/إزالة الأورام الحميدة، قد يستغرق الأمر حوالي 8 أسابيع قبل أن تصبح النتائج جاهزة. ستتلقى أنت وطبيبك المٌحيل نسخة منها بالإضافة إلى توصية بمواصلة الرعاية)

العلاج الموصى به والمتابعة:

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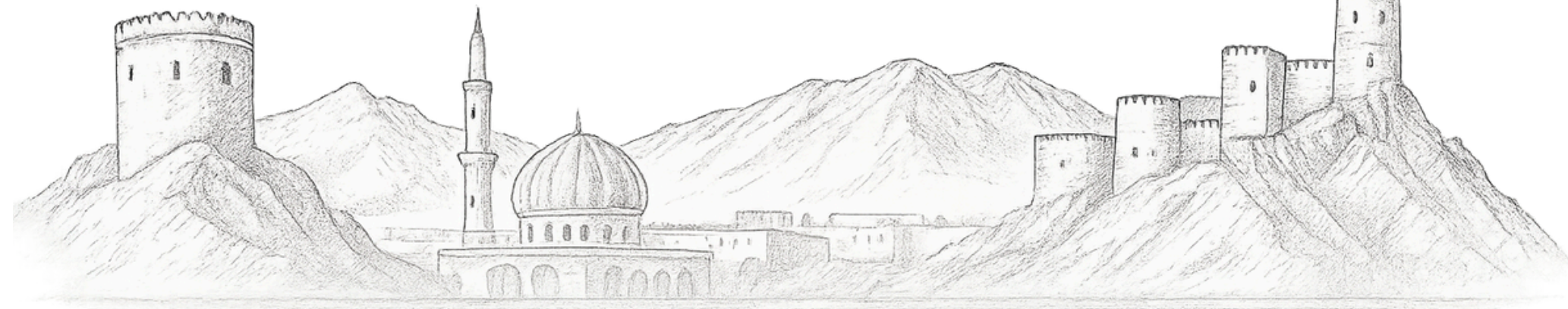
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الأمور التي يجب مراعاتها بعد الفحص:

- ابدأ بتناول طعام خفيف وشرب الكثير من الماء خلال الساعات القليلة الأولى بعد العملية.
- من الشائع الشعور بانزعاج مؤقت في البطن بعد الفحص. في حالة استمرار



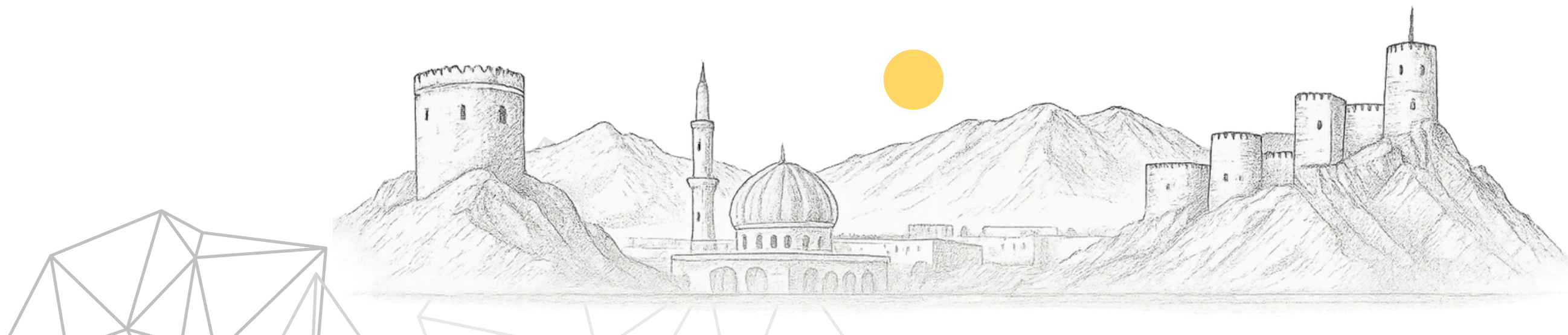
Summary

- •Standard photo-sets confirm anatomy & pathology
- •Labels & lot tracking ensure traceability
- •Reprocessing logs guarantee patient safety
- •KPIs show efficiency, compliance, and staff performance
- •Incident / near-miss reporting prevents reoccurrence of event



Take-Home Message:

Documentation + KPIs + Reporting = Safer, more efficient endoscopy service



Thank You for your attention
Visit our online platform and
learn more



www.muscatendoscopyacademy.com

