

Practical Points from Matthew Yung:

1. It is important that the identity of the patients and surgeons remains anonymous. The hospital number or the name of the patient should not be put on the web-based database. Please use an encrypted number or a coded number for each patient. However you should have a way yourself to identify each patient from the code. Also do not put in the name of the surgeon. Use nicknames such as Superman, Batman, name of movie stars etc.
2. Once you insert the Patient Code and the proposed date of operation, the Case Code will appear automatically. You don't need to fill that in. If the same patient has several operations eg. bilateral stapedectomy, you will be able to identify different cases under the same patient code.
3. If you agree to be involved in this project and contribute to the 'Standards for middle ear operations', you must accept external validation of data. Normally this will be a peer from another clinic.
4. Should you want to start data input, please get in touch with the Webmaster Stephen Wilson stephen.wilson@ipswichhospital.nhs.uk to get your user name and password. Once you log in, you can change the user name and the password given to you.
5. I wish the operations of single surgeon to be submitted rather than the results from other staff in your clinic because I intend to use the cumulative results in the database as 'standards' for middle ear surgery.
6. You shall see your database in an Excel file from the website in almost real time. If you already keep a database in your practice, you can incorporate the Excel file from the website with your existing database. There is a comment section in the pre-op, op & post-op form. You can give in key words for your individual purpose eg. CT scan, Speech Audiogram done, Facial nerve monitor used, etc.
7. You may not see your patients for follow-up at exactly 3, 6, 12 months. The database will round it up for you eg. follow up at 4-mo will be categorized as 3-mo; follow up at 5-mo will be categorized as 6-mo.
8. If there is any procedures or prostheses that is not on the present operation data form, please get in touch with Matthew Yung so that he can add them into the data form on the website.
9. My advice is that the member should identify a specific person in the clinic to be responsible for transfer the data from the pre-op, op & post-op data forms onto the web. He/she can be a data clerk, an audiologist, a secretary or a responsible resident. The data entry onto the web can be done once per week. Each form will only take 2-3 minutes.
10. If you have problem using the web-based audit system, you can telephone the Webmaster Stephen Wilson on 0044-1473 704382. He can talk you through the system.
11. Further advice: Complete the preop data from at the time when patients attend for preop audiogram. Put the op forms in the operating room so that the surgeon can complete the form at the end of each operation. Put the forms in the outpatient clinic so that the doctor can complete the postop form when patient come for follow up consultation.