

Cinica project summary

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Project details

Title: **Hysteroscopic morcellation tissue removal system**

Code: **GYNAE/SE/2023-24/03**

Speciality: **Gynaecology**

Business unit: **Women's Services**

Is your project related to particular sites?: **Yes**

St Michael's Hospital

Is your project related to particular wards/areas?: **No**

Date registered: **30/04/2023**

Other associated specialities: **N/A**

Division: **Women's and Children's**

Project information

Priority: **2**

Lead participant: **[REDACTED]**

Audit mentor: **[REDACTED]**

Audit facilitator: **[REDACTED]**

Forward plan/additional

Forward plan/additional activity: **Forward plan**

Rationale

Hysteroscopic mechanical tissue removal (hysteroscopic morcellation) aims to remove endometrial polyps, submucous fibroids and RPOC with increased efficiency and reduced perforation risk. The procedure is performed in occipitoposterior position with local anaesthesia, typically as a day-case procedure. A hysteroscope is inserted into the uterus through the cervix and saline is pumped through a small channel in the hysteroscope to distend the uterus. A morcellator is passed through the hysteroscope and used to cut and simultaneously aspirate the morcellated fibroid tissue. The aspirated tissue can be collected for histological analysis. This is an audit of our new service.

Guidance

Code	Title
IPG522	Hysteroscopic morcellation of uterine leiomyomas (fibroids)

Criteria

No criteria has been added

Governance

Governance: **N/A**

Reference details: **N/A**

Project progress

Sign off date: **21/08/2023**

Presentations

Meeting title	Date & time	Location	Status
Obs and Gyn Audit Meeting	17/05/2023 09:00	St Michaels	Presented

Results

- 45 Myosure procedures during audit period
- Age range of patient: 23-81
- Mean age: 53

BMI range



Parity



Reason for myosure admission:

- Polyp
- Fibroid
- Polyp & Fibroid
- RPOC
- Unsuccessful procedure

Timings:

- Cutting times had a large range between 3 and 347 seconds
- Dependent on ease of location, multiple/single resection required, rigidity of tissue

Frequency of completed procedures:**Frequency of complete procedure**



Conclusions

Overall we can say there is significant assurance that the processes in place are well tolerated and of minimal risk to our patients. This is a safe procedure, allowing opportunity for complete resection of polyps in an OP setting.

Assurance & risk

Assurance

Assurance level	Description
Significant	The project has mostly achieved the standards or criteria being audited against

Risk


Risk level	Description
Low	Peripheral element of treatment or service suboptimal

Add to risk register: **No**

Reason: **N/A**

Action plan

Action plan approved by [REDACTED] on **15/06/2023**

	Recommendation(s)	Action	Responsible	Date raised	Due date	Action RAG	Progress
1	To review trust policies to identify whether we can streamline referrals straight to the myosure clinic	To review trust policies to identify whether we can streamline referrals straight to the myosure clinic	[REDACTED] [REDACTED]	15/06/2023	31/08/2023		Fully Complete

Re-audit

Would you like to schedule this audit to be conducted again?: **No**