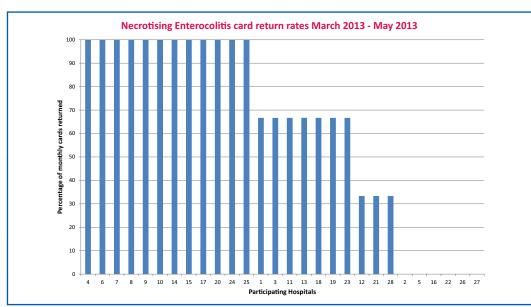


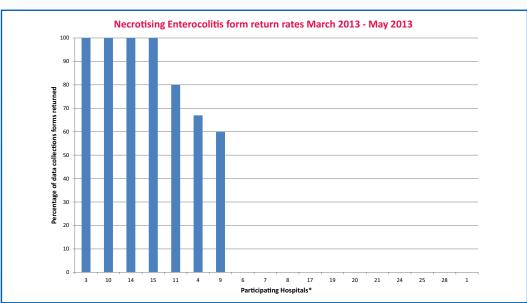
August 2013 - Newsletter

British Association of Paediatric Surgeons Congenital Anomalies Surveillance System

The national system to study the surgical management of a range of neonatal conditions - enabling national audit in neonatal surgery

Card and Form Return Rates





(*) 10 hospitals reported no cases of Necrotising Enterocolitis: Alder Hey Children's Hospital, Chelsea & Westminster Hospital, King's College Hospital, Leeds General Infirmary, Our Lady's Hospital for Sick Children, Royal Aberdeen Children's Hospital, Royal Manchester Children's Hospital, Royal Victoria Infirmary, St George's Hospital, The Children's University Hospital

Participating Hospitals

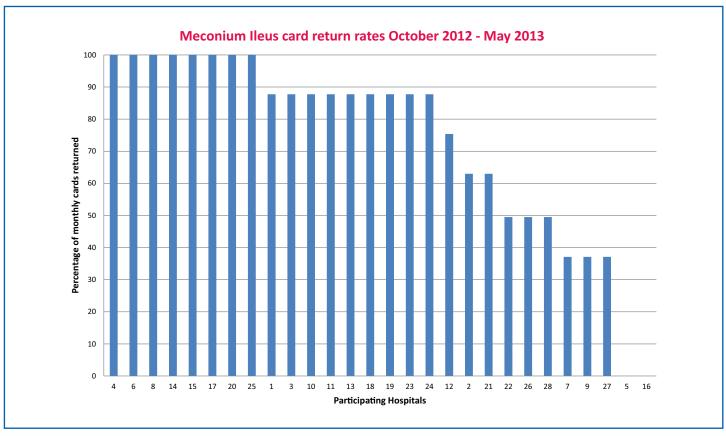
- Addenbrooke's Hospital
- 2. Alder Hey Children's Hospital
- 3. Birmingham Children's Hospital
- Bristol Royal Hospital For Children
- Chelsea and Westminster 5. Hospital
- Edinburgh Royal Hospital 6. for Sick Children
- Evelina Children's 7. Hospital
- 8. Glasgow Royal Hospital for Sick Children
- **Great Ormond Street** Hospital for Sick Children
- 10. **Hull Royal Infirmary**
- 11. John Radcliffe Hospital
- 12. King's College Hospital
- Leeds General Infirmary 13.
- Leicester Royal Infirmary 14.
- Norfolk & Norwich 15. University Hospital
- Our Lady's Hospital for Sick Children
- 17. Queen's Medical Centre
- 18. Royal Aberdeen Children's Hospital
- Royal Alexandra 19 Children's Hospital
- Royal Belfast Hospital for Sick Children
- 21. Royal London Hospital
- Royal Manchester Children's Hospital
- 23 Royal Victoria Infirmary
- Sheffield Children's 24 Hospital
- 25. Southampton General
- 26. St George's Hospital
- The Children's University Hospital
- University Hospital of 28. Wales

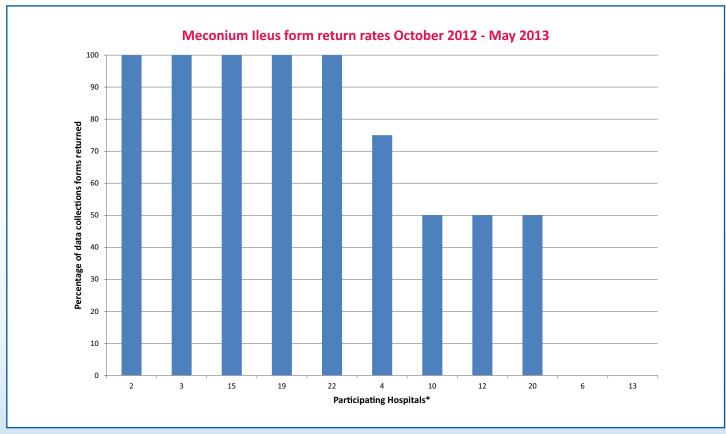
Read more online

To read this on your phone or to access our complete archive: Open the BARCODE READER APP† on your phone and scan the code here









(*) 17 hospitals reported no cases of Meconium Ileus: Addenbrooke's Hospital, Chelsea & Westminster Hospital, Evelina Children's Hospital, Glasgow Royal Hospital for Sick Children, Great Ormond Hospital for Sick Children, John Radcliffe Hospital, Leicester Royal Infirmary, Our Lady's Hospital for Sick Children, Queen's Medical Centre, Royal Aberdeen Children's Hospital, Royal London Hospital, Royal Victoria Infirmary, Sheffield Children's Hospital, Southampton General, St George's Hospital, The Children's University Hospital, University Hospital of Wales

Reporting to BAPS-CASS Important information for all BAPS-CASS reporters

Detach and keep this section

At the beginning of every month, each nominated BAPS-CASS reporter (for both Meconium Ileus and Necrotising Enterocolitis) will receive a blue monthly report card similar to that illustrated above. The following instructions provide guidance as to how to complete the cards.

If there are NO cases to report

- 1. Tick 'nothing to report' box
- 2. Tear along central perforation
- 3. Return report section to BAPS-CASS (freepost address on reverse side)
- Discard clinician's section of the card OR annotate that this month was a 'nil return' and file in BAPS-CASS white folder for reference

If there are CASES to report

- Fill appropriate box with number of cases to report eg. if one case of NEC, enter '1' in box next to NEC
- 2. Tear along central perforation
- 3. Return report section to BAPS-CASS (freepost address on reverse side)
- Complete clinician's side of card by filling in the relevant infant details on the table (this information is essential in ensuring that the infant can be identified when the data collection form is received)
- 5. File clinician's section of the card in the BAPS-CASS white folder





Completing data collection forms

On receiving the relevant data collection form from the BAPS-CASS team, please note the following:

- Each form will have an ID number written in the top right corner (this ID number will have been generated when the report card was processed by BAPS-CASS). Please write this ID number against the infant's name that was recorded on the clinician's section of the blue card at the time of reporting. If there have been numerous cases reported, it does not initially matter which ID numbers are allocated to which infant; however once assigned, that specific ID will stay with that infant throughout the study and will help you identify the infant at a later stage if necessary.
- When completing the form, please state on the form if you cannot provide answers to some questions after reviewing the infant's notes (making it clear which questions you are referring to). By doing this, you will ensure that BAPS-CASS do not repeatedly request the missing information.
- Please be aware that BAPS-CASS only collects anonymous data so therefore please do not enter any personally identifiable information on the forms (eg. name, address or hospital number).
- Before returning the form, we advise that you take a photocopy to file in the BAPS-CASS white folder for your records.

If you have any further questions regarding completing the monthly report cards or the data collection forms, please contact the BAPS-CASS team at baps-cass@npeu.ox.ac.uk.

Case report summary for cases reported up until May 2013

Condition	Cases Reported	Forms returned	Confirmed Cases	Unconfirmed Cases	Duplicate Cases
Hirschsprung's Disease	322	288 (89)	269 (93)	19 (7)	0
Hirschsprung's Disease 1yr Forms	266	160 (60)	160 (100)	0 (0)	0
Meconium Ileus	21	12 (57)	8 (67)	4 (33)	0
Necrotising Enterocolitis	50	17 (34)	17 (100)	0	0





