

## **ACCOUNTABLE ITEMS IN THE BIRTHING ENVIRONMENT (outside Operating Theatre)**

*This LOP is developed to guide clinical practice at the Newborn Care Centre, Royal Hospital for Women. Individual patient circumstances may mean that practice diverges from this LOP*

### **1. AIM**

- Ensure any accountable items used in the antepartum, intrapartum or postpartum birthing environment are recorded and removed

### **2. PATIENT**

- Woman giving birth and/or having a procedure

### **3. STAFF**

- Midwifery and medical staff

### **4. EQUIPMENT**

- Sponges (radio-opaque)
- Gauze swabs (radio-opaque)
- Tampons with tail (radio-opaque)
- Needles
- Birthing instruments
- Suturing instruments
- Procedural instruments

### **5. CLINICAL PRACTICE**

- Count all items used in the birthing environment at start of procedure and again at the conclusion and document on accountable items sticker (Appendix 1) or accountable items table in partogram (Appendix 2)
- Do not remove any items from procedural environment/room until procedure and count are complete
- Perform new count before completion of procedure or birth if:
  - change of clinician
  - change of location of woman
- Document and record the location of any accountable items that are deliberately left in the woman, on the count sheet AND in the woman's medical record
- Insert tampons only into the vagina. Ensure tail of tampon remains visible
- Record removal of any retained item in the woman's medical record and ensure tallies with previous count sheet
- Complete count at conclusion of procedure and document appropriately
- Report any discrepancies immediately to the clinician performing the procedure
- Report to the midwife in charge the discrepancy in the count, and subsequent plan of action
- Perform thorough manual and visual search of the operative field and any receptacles in procedure room, if any discrepancy in count

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- Order an X-ray, with the woman's consent, if after the completion of a thorough search:
  - the count is incorrect
  - a radio-opaque item is missing
- Document the outcome in the woman's medical record as well as on the accountable item sticker/table
- Complete an Incident Information Management System (IIMS) notification if X-ray required or item(s) remain missing

### **6. DOCUMENTATION**

- Medical record

### **7. EDUCATIONAL NOTES**

- Under NSW Health Incident Management policy all cases of retained items are investigated. These incidences are considered entirely preventable and should not happen.
- Handover and transfers are two key points of vulnerability.
- Problems associated with counts occur for several reasons including:
  - The count may be hurried
  - Items may not have separated when opened
  - Change of clinician mid-procedure
  - Removal of equipment/procedure trolleys from procedure area prior to final count
  - Change of site/woman moved to a different location before procedure or birth complete
- Use of vaginal tampons with tail has led to a reduction of retained vaginal sponges
- Retained vaginal sponges are the most commonly reported retained item
- The impact of retained sponges can be significant for a woman, with both physical and psychological implications, including postpartum haemorrhage, lack of bonding with neonate and sepsis.
- Counting is the responsibility of all members of the team present at the time of the procedure

### **8. RELATED POLICIES/PROCEDURES/CLINICAL PRACTICE LOPs**

- Second Stage of Labour - Recognition of Normal Progress and Management of Delay
- Fetal Blood Sampling - Intrapartum (FBS)
- Perineal/Genital Tract Repair
- Postpartum Haemorrhage - Prevention and Management
- Cervical Catheterisation for Mechanical Cervical Preparation
- Cervical Suture/Cerclage – Removal
- Third and Fourth Degree Perineal Tears – Repair and Management
- NSW Health Incident Management Policy PD 2019\_034

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### 9. RISK RATING

- Medium

### 10. NATIONAL STANDARD

- Standard 5 – Comprehensive Care

### 11. REFERENCES

- 1 Lean K, Page B, Vincent C. Improving Communication at Handover and Transfer Reduces Retained Swabs in Maternity Services. *European Journal of Obstetrics and Gynecology and Reproductive Biology* 2018; 22: 50-56.  
[www.sciencedirect.com/science/article/pii/S0301211517305080](http://www.sciencedirect.com/science/article/pii/S0301211517305080)
- 2 Corrigan S, Kay A, O'Byrne K, Slattery D, Sheehan S, McDonald N, Smyth D, Mealy K, Crombie S. A Socio-Technical Exploration for Reducing and Mitigating the Risk of Retained Foreign Objects. *International Journal of Environmental Research and Public Health* 2018; 15(4) [www.mdpi.com/1660-4601/15/4/714](http://www.mdpi.com/1660-4601/15/4/714)

### REVISION & APPROVAL HISTORY

Reviewed and endorsed Maternity Services LOPs group November 2019

Approved Quality & Patient Care Committee 2/6/16

Reviewed and endorsed Maternity Services LOPs group June 2016

Approved Patient Care Committee 5/6/08

Reviewed and endorsed Obstetric Clinical Guidelines Group June 2008

Replaced "Counting of Accountable items – non operating theatre areas" approved Quality Council 15/7/02

**FOR REVIEW: DECEMBER 2022**

...../Appendices

## APPENDIX 1

<b>ACCOUNTABLE ITEMS RECORD</b>			
Please circle procedure:			
<ul style="list-style-type: none"> <li>• Removal of cervical suture</li> <li>• Foleys catheter insertion</li> <li>• Other (specify)</li> </ul>			
	1 <sup>st</sup> Count	Additions	Final count
Gauze swabs			
Tampons			
Instruments			
Sponges			
Needles/Sharps			
Other			
RM signature			
2 <sup>nd</sup> Staff member signature			

## APPENDIX 2

<b>ACCOUNTABLE ITEMS RECORD</b>					
	1 <sup>ST</sup> COUNT	ADDITIONS	2 <sup>ND</sup> COUNT	ADDITIONS	FINAL COUNT
<b>SPONGES</b>					
<b>NEEDLES</b>					
<b>INSTRUMENTS/FSE</b>					
<b>PACKS</b>					
<b>OTHER</b>					
<b>RM SIGNATURE</b>			<b>PRINT NAME</b>		
<b>2<sup>ND</sup> STAFF SIGNATURE</b>			<b>PRINT NAME</b>		