

Quality of colonoscopy and photo evidence of Caecal intubation



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Abstract

Clear and unequivocal photos of caecal landmarks are seen as a marker of a quality colonoscopy. International guidelines recommend that at least two photos of appendiceal orifice and the ileocaecal valve be clearly recognisable and labelled (ASGE & ESGE). Furthermore they recommend that if the terminal ileum is entered another clearly identifiable photo should be attained.

In our study , we retrospectively reviewed 200 sequentially performed colonoscopies. Reports were selected from a period of time within the last six months and were printed on a colour printer. Complete reports were used and anonymised by removing all patient identifiers' All photos were examined including those not inserted into the softcopy for filing. Non labelled photos were also examined. Colonoscopies were carried out by surgeons and gastroenterologists and their teams. Images were reviewed by 3 independent observers. All photos were examined for the 3 caecal landmarks(Appendicular orifice ,Iliocaecal valve and terminal ileum

Of the 200 colonoscopies examined the caecum was reportedly reached in 184 cases. 16 examinations were reported as incomplete and were removed

from the study. (Caecal Intubation rate 92%) In those examined 143 had a clearly identifiable appendiceal orifice , 41 had no photo of AO. 127 had a photo of ileocaecal valve , 57 had no photo of ICV, 51 had a photo of terminal ileum.145/184(78%) had two or more landmarks, 39/184(21%) had only one caecal landmark photo.

There needs to be a programme of quality improvement with direction to all endoscopists within all endoscopic units to ensure the proper caecal identification photos as an evidence of completion of colonoscopy

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