

20220615 FOI ref 136-2223

15 June 2022

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Under the Freedom of Information Act please can you supply the following information:

The NPSA¹ and the recent HSIB investigation into nasogastric tubes² have reinforced the need to have clear and transparent reporting for X ray requests and interpretation of nasogastric tube placement.

“X-ray checking procedures must be timely and carried out by clinicians assessed as competent to do so. All results should be confirmed and recorded in the patient record ensuring the most current x-ray for the correct patient is reviewed, the four criteria for confirming gastric placement and clear instructions as to actions required are documented using a structured approach and communicated to the relevant nursing staff”.

There is limited flexibility within the National Interim Clinical Imaging Procedure (NICIP) Code set and may require the PACS team to capture the inputs in the free text fields.

Q1 Can you please confirm with the RIS/PACS team if the Trust have implemented the recommendations set out by the NPSA and reinforced in the HSIB report for X Ray reporting?

Yes	X
No	

To support this ‘Adult Authorisation Criteria’ below and then the ‘communication of urgent/critical findings – e-notification’ re-enforces this this has been included below for reference.

Adult Plain Imaging Authorisation Criteria:

- Chest for NG Tube:

Examination: CHEST FOR NG TUBE	Authorising Practitioner: DR RAZA
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Routine Projections:

- PA penetrated chest

¹ https://www.england.nhs.uk/wp-content/uploads/2019/12/Patient_Safety_Alert_Stage_2_-_NG_tube_resource_set.pdf

² <https://www.hsib.org.uk/investigations-and-reports/placement-of-nasogastric-tubes/>

Includes both hemi-diaphragmatic contour and upper abdomen:

<p>Authorisation Criteria:</p> <ol style="list-style-type: none"> ? Position of nasogastric tube (NGT) for the purpose of feeding with confirmed PH reading of more than 5.5 or no aspirate obtained. Medications - for example 'proton pump inhibitors', can change pH to levels that provide inaccurate readings to confirm NG tube placement is safe for use. 	<p>Contraindications:</p> <ul style="list-style-type: none"> Without an aspirate being attempted PH reading in the "safe range" 1-5.5
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<p>Supplementary projections/Further advice</p> <ul style="list-style-type: none"> AP when PA not possible Position imaging plate in portrait orientation Ensure the external portion of the NG tube is not over the patient's chest.
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<p>Special Instructions and Radiation Protection:</p> <ol style="list-style-type: none"> CRIS code XCHAB should be used. Both original and digitally enhanced image (Line view) must be saved to PACS along with any windowed images.
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Urgent Report Findings – E notification:

Incorrectly placed NG tube is categorised as a critical finding and requires immediate communication with the referrer/location of patients care to ensure it is removed/replaced correctly as a matter of urgency to remove any risk of it being used to feed/medication.

Q2 Can you please confirm the number of "Plain Film Chest X-Ray" requests (XCHES) where a nasogastric tube / NG tube was specified as free text in the clinical indication field or requested as "XR Nasogastric tube position" (XNASG) for the period from April 1st 2021 to March 31st 2022?

Number of cases reported	
XCHES + free text	Section 12 exemption as detailed in the attached letter – however note: Safe range of Ph is 2.0- 5.5 X-rays are only required if unable to get a ph or 6.0 or above- see attached document
XNASG	
Other	
Total	

Q3 Based on the response to Q2 can you please confirm if the reason for the request was captured: confirmation of 1st placement, suspected dislodgment / displacement of established nasogastric tube or simply not reported in the clinical indication field?

(This may include the SNoMED codes: Migration Of Nasogastric Tube (Disorder) 473160008)

	1st Placement	Dislodgement /	Not reported
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		Displacement	
Number reported			Section 12 exemption as detailed in the attached letter

Q4 Based on your response to Q3 can you please confirm if the site of the nasogastric tube was reported and the overall number with specific attention to the lung or oesophagus or in the stomach and safe to feed?

	1st Placement			
	Safe to feed - Tube in stomach	Do not feed - Tube in lung	Do not feed - Tube in oesophagus	Not reported
Number reported	Section 12 exemption as detailed in the attached letter			

	Dislodgement / Displacement			
	Safe to feed - Tube in stomach	Do not feed - Tube in lung	Do not feed - Tube in oesophagus	Not reported
Number reported	Section 12 exemption as detailed in the attached letter			

	Not stated			
	Safe to feed - Tube in stomach	Do not feed - Tube in lung	Do not feed - Tube in oesophagus	Not reported
Number reported	Section 12 exemption as detailed in the attached letter			

Please e-mail completed form to:

FOI/R/15