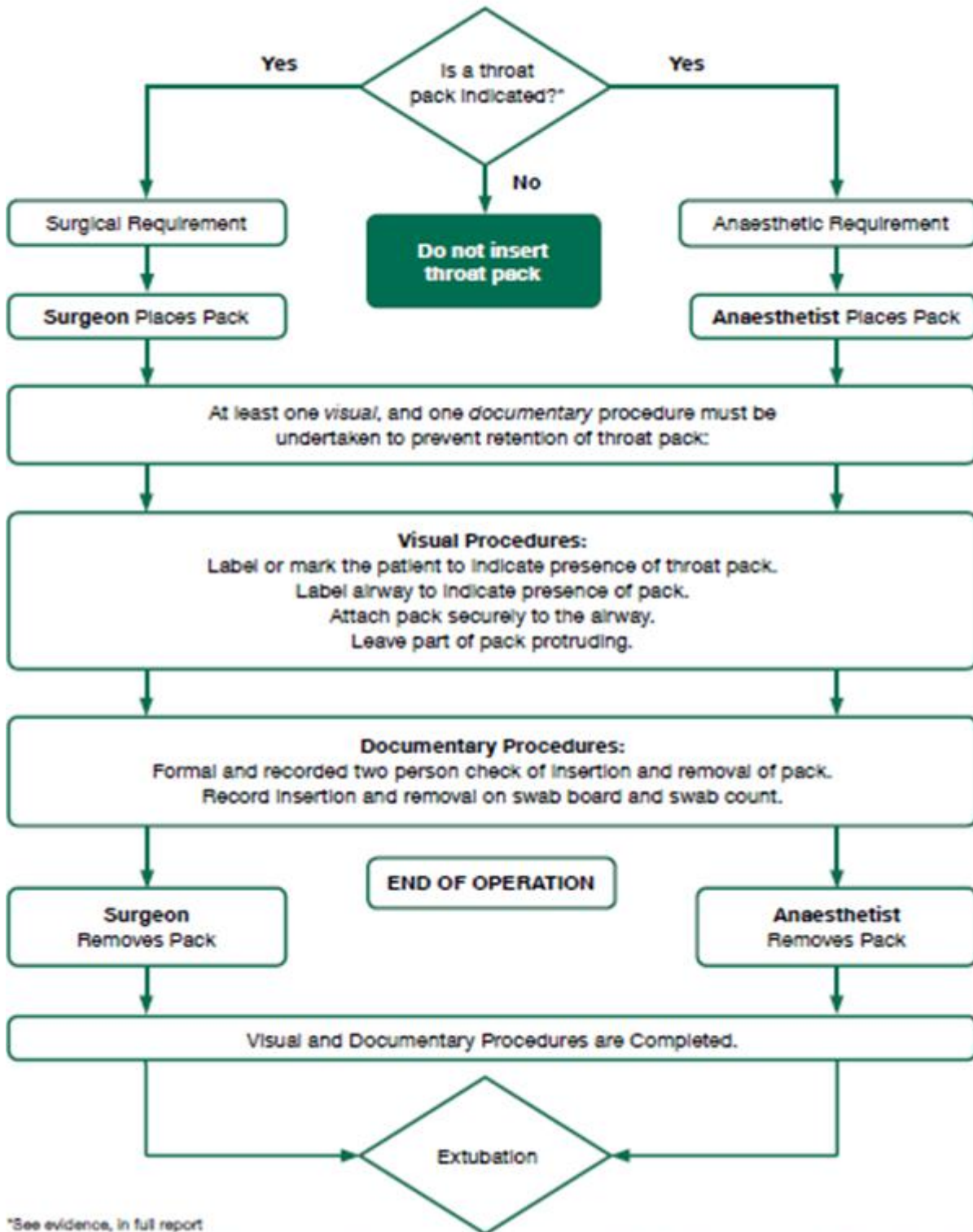


Use of Throat Packs in Theatres Clinical Guideline

V5.0

August 2020

Summary



*See evidence, in full report

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1. Aim/Purpose of this Guideline

1.1. To provide anaesthetists with guidelines for the management of cases involving throat packs.

1.2. This version supersedes any previous versions of this document.

Data Protection Act 2018 (General Data Protection Regulation – GDPR) Legislation

The Trust has a duty under the DPA18 to ensure that there is a valid legal basis to process personal and sensitive data. The legal basis for processing must be identified and documented before the processing begins. In many cases we may need consent; this must be explicit, informed and documented. We cannot rely on opt out, it must be opt in.

DPA18 is applicable to all staff; this includes those working as contractors and providers of services.

For more information about your obligations under the DPA18 please see the *Information Use Framework Policy* or contact the Information Governance Team rch-tr.infogov@nhs.net

2. The Guidance

2.1. Reason

Action required following alert dated 28 April 2009 Ref: **NPSA/2009/SPN001**

2.2. Background

Data from the NPSA between 1 January 2006 and 31 December 2007. Thirty-eight incidents were identified, of which 24 were unintended retention of throat packs; one resulting in moderate harm.

2.3. Indication for Throat Packs

2.3.1. Absorb material created by surgery in the mouth;

2.3.2. Prevent fluids or material entering the oesophagus or lungs;

2.3.3. Prevent escape of gases from around tracheal tubes;

2.3.4. Stabilise artificial airways.

2.3.5. When throat packs are used there should be visual and documentary checks in place for their safe insertion and removal.

2.4. Throat Pack Inserted by Surgeon

This should be included in the swab count. Insertion and removal recorded on the swab board

2.5. Throat Pack Inserted by Anaesthetist

2.5.1. ONLY OFFICIAL THROAT PACKS SHOULD BE USED.

2.5.2. Do not use green gauze swabs

2.6. Visual Check

Throat pack inserted with green sutured end first (visual check that throat pack is whole on removal) If throat pack is to be cut, it should be done so with one end held straight so that no loops are cut out. Tie a knot in the cut end to visualize two distinct ends on removal (the knot and sutured end) Label or mark patient with adherent sticker on the forehead.

2.7. Documentary Check

Formalised and recorded “two-person” check of insertion and removal. This should be documented on the anaesthetic chart as time in and time out.

2.8. Use WHO Surgical Checklist

2.9. Additional Supporting Information

Additional supporting information can be found on the NPSA website (search for ‘Throat Packs’). The flowchart below is reproduced from the NPSA website within the terms of their copyright agreement.

3. Monitoring compliance and effectiveness

Element to be monitored	Adherence to RCHT Guidelines
Lead	Lead anaesthesia consultant for each case
Tool	Audit and review of suspected cases of inappropriate throat pack management would take place in monthly anaesthesia governance meetings
Frequency	Will be determined by the incidence of cases.
Reporting arrangements	The committee reviewing the cases will be the anaesthesia directorate. Cases will be discussed at audit meetings and the details will be recorded in the minutes.
Acting on recommendations and Lead(s)	See above
Change in practice and lessons to be shared	Required changes to practice will be identified and actioned within a month. A lead member of the team will be identified to take each change forward where appropriate. Lessons will be shared with all the relevant stakeholders

4. Equality and Diversity

4.1. This document complies with the Royal Cornwall Hospitals NHS Trust service Equality and Diversity statement which can be found in the ['Equality, Inclusion & Human Rights Policy'](#) or the [Equality and Diversity website](#).

4.2. Equality Impact Assessment

The Initial Equality Impact Assessment Screening Form is at Appendix 2.

Appendix 1. Governance Information

Document Title	Use of Throat Packs in Theatres Clinical Guideline V5.0		
This document replaces (exact title of previous version):	Clinical Guideline for the Use of Throat Packs in Theatres V4.0		
Date Issued/Approved:	31 July 2020		
Date Valid From:	August 2020		
Date Valid To:	August 2023		
Directorate / Department responsible (author/owner):	Dr Sam Banks Consultant Anaesthetist		
Contact details:	01872 258195		
Brief summary of contents	To provide anaesthetists with guidelines for the management of cases involving throat packs.		
Suggested Keywords:	Anaesthetics, throat pack		
Target Audience	RCHT ✓	CFT	KCCG
Executive Director responsible for Policy:	Medical Director		
Approval route for consultation and ratification:	Anaesthetic Governance and Business Group		
General Manager confirming approval processes	Doug Riley		
Name of Governance Lead confirming approval by specialty and care group management meetings	Matthew Body		
Links to key external standards	NPSA (28 April 2009 Ref: NPSA/2009/SPN001)		
Related Documents:	None		
Training Need Identified?	No		
Publication Location (refer to Policy on Policies – Approvals and Ratification):	Internet & Intranet	✓	Intranet Only
Document Library Folder/Sub Folder	Clinical / Anaesthetics		

Version Control Table

Date	Version No	Summary of Changes	Changes Made by (Name and Job
26 Nov 2010	V1.0	Initial version	Unknown
31 Oct 2011	V2.0	Revised cover and impact forms	Unknown
27 Nov 2014	V3.0	Revised cover and impact forms	Dr Sam Banks, Consultant Anaesthetist
01 June 2017	V4.0	Minor Changes	Dr Sam Banks, Consultant Anaesthetist
31 July 2020	V5.0	Revised formatting and transposed to latest Trust template	Dr Sam Banks, Consultant Anaesthetist

All or part of this document can be released under the Freedom of Information Act 2000

This document is to be retained for 10 years from the date of expiry.

This document is only valid on the day of printing

Controlled Document

This document has been created following the Royal Cornwall Hospitals NHS Trust Policy for the Development and Management of Knowledge, Procedural and Web Documents (The Policy on Policies). It should not be altered in any way without the express permission of the author or their Line Manager.

Appendix 2. Equality Impact Assessment

Section 1: Equality Impact Assessment Form						
Name of the strategy / policy /proposal / service function to be assessed Use of Throat Packs in Theatres Clinical Guideline V5.0						
Directorate and service area: Anaesthetics			Is this a new or existing Policy? Existing			
Name of individual/group completing EIA Matthew Body, Governance Lead			Contact details: 01872 252645			
1. Policy Aim Who is the strategy / policy / proposal / service function aimed at?		To provide anaesthetists with guidelines for the management of cases involving throat packs				
2. Policy Objectives		As above				
3. Policy Intended Outcomes		Safe management of cases using throat packs				
4. How will you measure the outcome?		Monitoring through incident reporting and case discussion at governance meetings.				
5. Who is intended to benefit from the policy?		Patients				
6a). Who did you consult with?		Workforce	Patients	Local groups	External organisations	Other
		X				
b). Please list any groups who have been consulted about this procedure.		Please record specific names of groups: Anaesthetic Governance and Business Group				
c). What was the outcome of the consultation?		Agreed				

7. The Impact				
Please complete the following table. If you are unsure/don't know if there is a negative impact you need to repeat the consultation step.				
Are there concerns that the policy could have a positive/negative impact on:				
Protected Characteristic	Yes	No	Unsure	Rationale for Assessment / Existing Evidence
Age		X		
Sex (male, female non-binary, asexual etc.)		X		
Gender reassignment		X		
Race/ethnic communities /groups		X		
Disability (learning disability, physical disability, sensory impairment, mental health problems and some long term health conditions)		X		
Religion/ other beliefs		X		
Marriage and civil partnership		X		
Pregnancy and maternity		X		
Sexual orientation (bisexual, gay, heterosexual, lesbian)		X		
<p>If all characteristics are ticked 'no', and this is not a major working or service change, you can end the assessment here as long as you have a robust rationale in place.</p> <p>I am confident that section 2 of this EIA does not need completing as there are no highlighted risks of negative impact occurring because of this policy.</p>				
Name of person confirming result of initial impact assessment:			Matthew Body, Governance Lead	
<p>If you have ticked 'yes' to any characteristic above OR this is a major working or service change, you will need to complete section 2 of the EIA form available here:</p> <p>Section 2. Full Equality Analysis</p> <p>For guidance please refer to the Equality Impact Assessments Policy (available from the document library) or contact the Human Rights, Equality and Inclusion Lead debby.lewis@nhs.net</p>				