

**Unexpected Intraoperative Life Threatening Haemorrhage**

**National Clinical Guideline**

**Public Consultation Feedback Form**

Consultation closing date:The deadline for comments is **Friday 30th July 2021 at 5pm.** Please use thefeedback sheet below and return via email to: **miriamkennedy@rcsi.ie**

**Introduction**

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| We would like to hear your views on the draft National Clinical Guideline - Unexpected Intraoperative Life Threatening Haemorrhage.All comments received on this form by the deadline will be considered and used to inform the final clinical guideline.  Clinical guidelines are an important contributor to safe high quality healthcare. Good clinical guidelines help change the process of healthcare, reduce variation, improve outcomes for service users and ensure the efficient use of healthcare resources (NCEC p.6).  The draft clinical guideline contains a number of recommendations, each with a statement of the evidence used by the Guideline Development Group when they formed the recommendation.  Further information on the NCEC and National Clinical Guidelines is available from  <http://health.gov.ie/national-patient-safety-office/ncec/>  **Notes:**   1. Feedback received may be edited and/or summarised. 2. This consultation is conducted in line with requirements of the Freedom of Information (FOI) Acts as applicable and Data Protection requirements. Please note your submission may be published under this or in a report on the consultation. This may be on a website or in a document. 3. Submissions which are not attributable to an individual or group will not be considered. 4. Organisations making submissions should be aware of their obligations under the terms of the Regulation of Lobbying Act 2015. |

**Scope of draft clinical guideline**

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| The guideline will span acute clinical specialties where interventions and operations occur:   * The guideline will provide guidance to theatre teams and associated healthcare professionals on the recommended practices for unexpected intraoperative life threatening haemorrhage in the following areas:  1. Prevention of intraoperative life threatening haemorrhage 2. Immediate recognition of life threatening haemorrhage 3. Timely response and management of life threatening haemorrhage  * The clinical scenarios deemed out of scope for the Guideline are as follows:  1. Life Threatening haemorrhage (Massive/major haemorrhage) in patients that have presented as trauma patients (i.e. patients where massive haemorrhage has not arisen from the procedure/intervention itself) 2. Post-partum massive haemorrhage 3. Post-operative bleeding 4. Life threatening haemorrhage (massive/major haemorrhage) in paediatric patients |

**How to submit your feedback**

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| How to submit your feedback:   * All feedback must be submitted on this form if it is to be considered * Ensure you have completed your details or your group’s details * Identify clearly the recommendation your feedback relates to by identifying recommendation number and inserting your comments into aligned row * Each comment should be in a separate box * Specifically you must explain the rationale for your comment, which should be written clearly and concisely * Submit the form as a word document via email * Use full terms for abbreviations on first use * If you refer to sources of evidence, please detail the reference (with weblink if available) |

**Consultation questions**

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| This consultation focuses on how user friendly the document is, the content (evidence statements and recommendations) and the implementation of the draft guideline.   1. ***Content*** 2. Do the recommendations cover the scope of Unexpected Intraoperative Life Threatening Haemorrhage? 3. Do the recommendations clearly link to the evidence presented or otherwise to best practice? 4. Does the draft guideline consider the views and needs of specific population groups? 5. Does the draft guideline consider gaps in current practice? 6. ***Implementation*** 7. Is the guideline suitable for routine use as intended? 8. Which areas do you think may be difficult to put into practice? Please explain why. 9. What would help users to implement the guideline? |

**Your details**

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| --- | --- |
| Name of person completing form |  |
| Organisation name |  |
| Are you commenting ….? (tick box) | € As an individual € On behalf of an organisation |
| Contact Telephone Number |  |
| Contact Email Address |  |
| Date of feedback |  |

**Feeedback**

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| **Section 1** | **Summary of Recommendations** |
| **1.1 Summary of Recommendations** | **Comment/feedback** |
| **Section 2** | **Development of the National Clinical Guideline** |
| **2.1 Background** | **Comment/feedback** |
| **2.1 Clinical and Financial Impact** | **Comment/feedback** |
| **2.3 Rationale for Guideline** | **Comment/feedback** |
| **2.4 Aims and Objectives** | **Comment/feedback** |
| **2.5 Guideline Scope** | **Comment/feedback** |
| **2.6 Conflict of interest statement** | **Comment/feedback** |
| **2.7 Sources of funding** | **Comment/feedback** |
| **2.8 Guideline methodology** | **Comment/feedback** |
| **2.9 Consultation summary** | **Comment/feedback** |
| **2.10 External Review** | **Comment/feedback** |
| **2.11 Implementation** | **Comment/feedback** |
| **2.12 Monitoring and Audit** | **Comment/feedback** |
| **2.13 Plan to update this National Clinical Guideline** | **Comment/feedback** |
| **Section 3** | **National Clinical Guideline recommendations** |
| **3.1 Question 1, evidence statement and recommendation 1** | **Comment/feedback** |
| **3.1 Question 2, evidence statement and recommendation 2** | **Comment/feedback** |
| **3.1 Question 3, evidence statement and recommendation 3** | **Comment/feedback** |
| **3.1 Question 4, evidence statement and recommendation 4** | **Comment/feedback** |
| **3.1 Question 5, evidence statement and recommendation 5** | **Comment/feedback** |
| **3.1 Question 6, evidence statement and recommendation 6** | **Comment/feedback** |
| **3.1 Question 7, evidence statement and recommendation 7** | **Comment/feedback** |
| **3.1 Question 8, evidence statement and recommendation 8** | **Comment/feedback** |
| **3.1 Question 9, evidence statement and recommendation 9** | **Comment/feedback** |
| **3.1 Question 10, evidence statement and recommendation 10** | **Comment/feedback** |
| **3.1 Question 11, evidence statement and recommendation 11** | **Comment/feedback** |
| **3.1 Question 12, evidence statement and recommendation 12** | **Comment/feedback** |
| **3.1 Question 13, evidence statement and recommendation 13** | **Comment/feedback** |
| **3.1 Question 14, evidence statement and recommendation 14** | **Comment/feedback** |
| **3.1 Question 15, evidence statement and recommendation 15** | **Comment/feedback** |
| **3.1 Question 16, evidence statement and recommendation 16** | **Comment/feedback** |
| **3.1 Question 17, evidence statement and recommendation 17** | **Comment/feedback** |
| **3.2 Budget impact analysis** | **Can be ignored as part of the Consultation Review - Work is underway in completing the BIA and will not be finished until the Public Consultation process is completed as the output will feed into the process.** |
| **Appendix 1 - Terms of Reference** | **Comment/feedback** |
| **Appendix 4 - Evidence to Decision Framework Part A** | **Comment/feedback** |
| **Appendix 4 - Evidence to Decision Framework Part B** | **Comment/feedback** |
| **Appendix 4 - Evidence to Decision Framework Part C** | **Comment/feedback** |
| **Appendix 5 – Logic Model** | **Comment/feedback** |
| **Appendix 6 – Implementation Plan** | **Comment/feedback** |
| **Appendix 7.1 – Framework Document** | **Comment/feedback** |
| **Appendix 7.2 – National Intraoperative Life Threatening Haemorrhage Poster** | **Comment/feedback** |
| **Appendix 7.3 – Data Capture** | **Comment/feedback** |
| **Appendix 8 – Monitoring & Audit** | **Comment/feedback** |
| **Appendix 9 – Glossary of abbreviations** | **Comment/feedback** |

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| **Please document and other relevant comments that you would like to make below. (Please detail the page number, rationale and any supporting documentation)** |