OP10

AUDIT OF VIDEO URODYNAMICS REPORTING STANDARDS – CAN WE IMPROVE THE QUALITY OF URODYNAMICS REPORTS?

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Introduction/Background:

Urodynamic testing is widely used in objective evaluation of bothersome lower urinary tract symptoms. The key quality control recommendations focus on the quality of recorded traces, calibration and equipment maintenance. However, the value of a report that accompanies the urodynamic data is often underestimated. Our audit objectively examines video-cystometrogram (VCMG) reporting quality across different services and clinicians at one large tertiary urology centre.

Methods/Materials:

Our retrospective audit evaluated 20 consecutive urodynamics reports from all the clinicians performing and reporting VCMG investigations at our hospitals in 2020 against the pre-selected criteria. We also compared the scores between the clinicians who use an in-house Access database for reporting and those who do not, to establish whether such tools could improve the consistency and quality of reporting. A chi-squared test with p-value <0.05 was used to assess statistical significance.

Results:

A total of 200 reports (20 each from 10 clinicians) were selected for review. Five of the clinicians routinely used MS Access database that was developed in-house to facilitate urodynamic report writing, while others preferred to write reports without the tool. We note that the reporters who did not use the in-house reporting database were less likely to include details about catheterisation, positions during filling and voiding, and description of urethra and bladder neck during filling. All reports often included limited information about the uroflow and omitted the methods of stress provocation and representativeness of the filling and voiding phases. See full summary of the results in Figure 1.

Conclusions:

We found that using the in-house reporting database significantly increased the likelihood of reports containing more of the recommended elements. The consistency of reporting could be improved further by making changes to the database to make sure it specifically includes all the recommended urodynamics criteria.