

MPU Audit (tick each box that applies as appropriate)						
Patient sticker (if not available complete below)				Date of procedure:		
Hospital number:						
Name:				Start time of procedure:		
				End time of procedure:		
ID number				In patient	Data collection	yes
Date of birth:				Out patient	consent given	no
Doctor's name	Barrow	Bizos	Bobat	Devar	Harran	Hunter
	Joseph	Karlsson	Lutrin	Mahomed	Oettle	Ramos
	Seabi	Surridge	Other:			
Gender	Male	Female				
Ethnicity	Black	White	Coloured	Indian / Asian	Other	
Scope details						
100 series - MPU		SN: 2513628	SN:2513634			
200 series - MPU		SN:2200734	SN:2100583	SN:2310125 (paeds)	SN:2101371	
200 series - theatre		SN:2001154	SN:2700632	SN:2001144		
If the scope is not listed above enter SN here						
Scope guide used		Yes	No			
Anesthetist		Yes	No			
Indication	Screening			IBD surveillance		
	Abdominal pain			Investigation of diarrhoea		
	Anaemia			Polyp surveillance		
	Ca surveillance			Rectal bleeding		
	Change of bowel habits			Other, describe:		
	Constipation					
	IBD symptoms					
Starting intention is to reach	Terminal ileum		Actual area reached	Terminal ileum	yes	no
	Caecum			Caecum	yes	no
	Ascending colon			Ascending colon	yes	no
	Transverse colon			Transverse colon	yes	no
	Descending colon			Descending colon	yes	no
	Sigmoid colon			Sigmoid colon	yes	no
	Rectum			Rectum	yes	no
If area not reached, the reason	Difficult scope			Poor bowel prep		
	Diverticular disease			Obstructing lesion		
	Abandoned - why:					
	If other, describe					
Nurses comment:						
Polyps			Yes		No	
Therapeutic scope			Yes		No	
Type of therapy			Polypectomy		APC	
If therapy is other, describe						
Specimen sent			Yes		No	
Bowel Prep	Good	Fair	Poor	Bad		
Withdrawal time (minutes and seconds):						
Nurse's Name:			Nurse's Signature:			