

*Manitoba Health, Seniors and Active Living (MHSAL) supports reporting and learning from patient safety events. The focus of a patient safety review is to closely look at the health care system that surrounds and interacts with those giving and receiving care. The goal is to identify risks to patient safety and recommend the most effective ways to minimize risk and improve the delivery of healthcare.*

## **Patient Safety Learning Advisory**

### **Delay in Treatment Following Outpatient Surgical Procedure**

#### **Summary:**

An infant underwent circumcision at a health clinic. Following the procedure, the infant was discharged home. Later that afternoon, the infant was brought to the Emergency Department (ED) due to concerns about bleeding from the surgical site.

The infant was assessed by the physician and discharged home. Later that evening, the infant was returned to the ED as bleeding continued from the surgical site. The infant was triaged at a Level 3 requiring urgent assessment.

After waiting for an hour to be seen, the infant's caregivers left the Emergency Room without being seen.

During the night, the infant was returned to the ED due to continued bleeding from the surgical site and a decline in their health status.

The infant required transfer to a tertiary care site by the neonatal transport team due to multiple complications.

**Keywords: Delay in Treatment, Infant circumcision**

This review is based on a single event.

**Findings of the Review:**

Multiple high acuity patients in the emergency department filling all the available assessment/treatment/trauma/stretchers to a maximum capacity increased the likelihood that the 30-minute reassessment time was not achieved during the second emergency visit.

Communication with the family was limited.

A partial set of vital signs was obtained as the blood pressure cuff for infants was not available at the Emergency Department triage desk.

**System Learning:**

Audit triage levels with reassessment times according to the Canadian Triage and Acuity Scale (CTAS) to determine if the site is meeting best practice standards and determine actions needed to meet these targets.

A blood pressure cuff suitable for use with neonates needs to be available at the triage desk.

Re-educate health care providers on the importance of engaging patients/families and documentation of discussion regarding the triage process/wait times in the Emergency Department.

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