

Ref: FOI/GS/ID 9496

Please reply to:

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## Freedom of Information Act 2000

I am writing in response to your request for information made under the Freedom of Information Act 2000 in relation to Retained Object Post-Procedure Occurrences.

You asked: All questions are shown as received by the Trust.

1. How many incidents of a retained foreign object post-procedure were logged by your Trust in the past five years?

By 'retained foreign object post procedure', I refer to retained guide wires, mouth props, surgical instruments, needles, vaginal swabs, throat packs, etc. Please break down this information by:

- a. The retained item.
- b. The financial year, covering April 1st March 31st (2019/20, 2021/22, 2022/23, 2023/24, 2024/25). For the latter, please provide information from April 1st to September 30th 2024.

## Trust response:

- 1. There were 6 incidents reported of a retained item post-procedure.
- a. Retained Item see incident description

## **Incident Description**

DUPLICATE INCIDENT: Guide wire retention during central line insertion in right IJV

Pt in AF with RVR. Required central line. ITU Anaesthetic doctor came to CCU to insert CVC to internal jugular vein. Same inserted successfully but following insertion unable to find guiding wire.

During surgery and removing metal work out of the patients ankle, a screw head broke off. The consultant surgeon decided it was more of a risk to try and remove the remainder of the screw compared with leaving the remaining shaft of screw (<2cm) in the patients left distal fibula.

I performed an operation to fix an elbow fracture and used a cannulated screw which is a screw that goes over a wire. The wire is inserted first, the wire was very small diameter and it broke leaving metal in the patient.

## Red tag lost in post suture count

Never Event - 4 weeks' post-natal, referred to the OnCall Gynae Team by the GP regarding history of offensive smelling discharge and retained swab per vagina.

Patient seen by the Gynae Oncall Team. Vaginal and Speculum examinations performed and large swab removed from the posterior fourchette. Swab sent for Microbiology, Sensitivity and Culture.

b. Because of the very small number of cases and in order to protect patient and staff confidentiality due to the nature of the questions in the request which can lead to further interrogation of other available information that may prove to identify those persons involved, the Trust has decided that further more detailed information be refused using the limitations available under Section 40(2) of the Act.