

11.07 Results of the Irish Thoracic Society (ITS) Bronchoscopy questionnaire in preparation for the National Bronchoscopy Quality Improvement project

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The National Bronchoscopy Quality improvement (QI) programme will be the fourth of its kind in addition to established QI projects in GI Endoscopy, Histopathology and Radiology. In preparation for the programme a questionnaire was circulated to public and private hospitals analyzing common trends in Bronchoscopy nationally. 19 hospitals (15 Public, 4 private) with Bronchoscopy units responded. 70% of institutions use the EndoRAAD Bronchoscopy reporting system with the remainder using Unisoft (18.75%) or other systems. Average waiting time for non-urgent essential bronchoscopy is 11.68 days and for suspected lung cancer is 4.10 days. Waiting time for EBUS-TBNA is an average of 7.33 days. Midazolam and Fentanyl are almost universally used for conscious sedation and use of reversal agents documented as an adverse event in every institution. 81.25% of facilities have onsite access to ICU while the remainder have access to immediate ambulance transfer for emergencies. 62.5% of units provide Registrar training with 93.75% supervised by consultants. This joint ITS/RCPI QI programme supported study reveals that waiting times for urgent and non-urgent bronchoscopy are within international recommendations and sedation and safety practices are broadly similar nationally. The questionnaire will help select key performance indicators (KPIs) for the QI programme moving forward.

Conflict of Interest: None to declare