



The Bariatric Surgery Registry Newsletter

Issue #9, December 2016

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Holiday Greetings from the BSR!

Welcome to the Ninth Edition of the Bariatric Surgery Registry Newsletter. Everyone at the BSR is excited about reaching new heights with the number of patients on the registry, participating surgeons and hospitals set to soar in the New Year!

Please note the registry will be closed from December 22-January 2 with staff returning on Jan 3 ready to enter your data!

Everyone at the BSR would like to wish everyone a safe and happy festive season. Our sincere thanks to everyone who supports and participates in the BSR.

Welcome Marlene Jacobs

Marlene Jacobs joined the registry in October as our new Administration Officer and will be your main contact when you ring the registry. Marlene hails from Houston Texas and has worked previously at Melbourne's Royal Children's Hospital. Please join the registry in giving her a warm welcome!

HEALTHSCOPE HOSPITALS APPROVED!!!!!!

The last of the HealthScope sites where surgeons are known to undertake bariatric procedures were approved by The Alfred Human Research Ethics Committee on December 1, 2016. All bariatric procedures performed at these sites are now eligible for inclusion on the registry. The newly approved HealthScope sites are:

- Campbelltown Private Hospital
- Darwin Private Hospital
- Geelong Private Hospital
- Gold Coast Private Hospital
- John Fawcner Private Hospital
- Knox Private Hospital
- The Mount Private Hospital
- National Capital Private Hospital

- Nepean Private Hospital
- Newcastle Private Hospital
- Northpark Private Hospital
- Norwest Private Hospital
- Prince of Wales Private Hospital
- Sunnybank Private Hospital
- Sydney Southwest Private Hospital

Ramsay Health Update

The registry is finalising Ramsay Health's legal requirements in order to start the amendment submission to the Alfred HREC for ethics approval. *Principal Investigator support is wanted for the new Ramsay Sites.* Please indicate your interest by emailing jenifer.cottrell@monash.edu

Is a Laparoscopy and Washout recorded as a separate operation on the BSR? What about Stents, Dilatations, Divisions of adhesions, Cholecystectomy...?

Any return to theatre directly caused by a previous bariatric procedure needs to be recorded in the BSR. Even if the patient has returned six times to have a washout/drainage, each should be recorded as an individual operation. Please submit the dates of each additional procedure.

Procedures that are to be included:

- Lavage/Washout, Drainage
- Stent (insertion or removal)
- Dilatation
- Division of Adhesions
- Control of post-op bleeding
- Sub-total gastrectomy
- Cardiopexy
- Gastropexy
- Refashion gastric pouch
- Incisional hernia repair
- Cholecystectomy caused by an operative injury

Do NOT include the following procedures:

- Apronectomy or other skin removal procedures
- Cholecystectomy



Missing Data Work List on the BSR-i the registry's online database

Are you currently using the BSR-i? The Missing Data Work List is a great way to see who amongst your patients is due for perioperative and annual follow-ups. The lists are complete for each of the sites where you are submitting operations. This Work List can be checked at any time so there is no need to wait for a prompt from the registry to do your follow-ups.

When you check the work list, a RED "X" indicates a follow-up that is due/over-due. Click on the X in order to enter the patient information. Enter the date the patient was seen for their follow-up and any adverse event for the Perioperative Follow-up. For Annual Follow-up, enter the follow-up visit date, patient weight at that visit and the patient's diabetes status and management. *If you want to know the long-term clinical benefits of your bariatric procedures such as excess weight loss and change in diabetes treatment, it is essential that you give us this annual follow-up information.*

If the patient did not return to your rooms within the allocated time window, still enter a "follow-up date" such as the 3 month (for periop) or 12 month (for annual) anniversary and tick the box "BSR to follow up."

Submitting Follow Up Data is Crucial!!!

ATTENTION NON-BSRi (aka Paper) Users!!

How do you want to receive your Follow Ups??

Options available:

- Pre-populated blue follow up forms or,
- An emailed spreadsheet (which is password protected)

Please advise the registry of your preference

Email med-bsr@monash.edu

Revisional Procedures- Planned vs Unplanned

To clarify the difference between a 'planned' and 'unplanned' revision:

- A revision is considered 'unplanned' when that procedure was not part of their *treatment plan at the time of their previous operation*. The removal of a lap-band is not planned when it is inserted, therefore its removal would be 'unplanned'.
- A revision is 'planned' if the procedure was part of the patient's treatment plan. That is, the surgeon plans to stage the revision surgery. If at the time of the removal of the lap-band, it is planned to return to theatre at a later date to do a sleeve, the lap band removal would be 'unplanned' but the sleeve procedure would be 'planned'. If a port is infected, its removal would be 'unplanned' but when you return to theatre 4 weeks later to re-insert, it would be considered 'planned'.

Most revision procedures would be considered UNPLANNED as they were not intended in the patient's treatment plan at their previous operation.

OSSANZ Conference 27-28 October

Wendy Brown, Dianne Brown, Aileen Heal, Jenifer Cottrell and Anna Palmer attended the OSSANZ Conference in October. In addition to hearing the engaging speakers, the Registry delegates had a table for meeting OSSANZ members and accompanying staff.

Thanks to everyone who stopped by the BSR table. It was a wonderful pleasure to be met by so many people interested in participating in the registry.



Recognising Significant and Outstanding Contributors to the BSR

The significant effort made and the support given by many of the surgeons and their staff is worthy of distinction. The registry wants to acknowledge these contributors and now has two new logos that will be made available for use by surgeons when significant levels of contribution to the registry have been reached.

Surgeons awarded these levels of contribution will be notified by mail of their status and will receive a certificate of distinction. They will also be emailed a jpeg file of the logo to use on websites and stationery.

A list of the surgeons who have achieved Valued Contributor and Leading Contributor status will be published in the next newsletter.



Contribution level for **BSR Valued Contributor**:

- ✓ Submits > 30 operations to the BSR per year
- ✓ Returns at least 50% Follow Ups



Contribution level for **BSR Leading Contributor**:

- ✓ Has submitted > 100 operations to the BSR in total
- ✓ Returns at least 70% of follow-ups

GROWING THE BSR: the 20,000th consented patient about to be reached...

The number of consented patients has reached 19,132. The Opt Out rate remains low at 3.39%. The number of participating bariatric surgeons has increased to 119 contributing from 70 sites across Australia.

Paperless Office? Enter online with the BSR-i

The BSR-i is accessed online

<https://bsr.registry.org.au>

Contact the registry for a user name and password. The online database known as the Bariatric Surgery Registry Interface (BSR-i) allows participating surgeons (or their staff or data collectors) to enter data directly onto the database, eliminating the need for hard copy forms.

Watch the YouTube Training Video to learn how to use BSR-i:

<https://www.youtube.com/watch?v=vdub6xlpJeY&feature=youtu.be>

Alternatively, training can be organised. For information please email:

jenifer.cottrell@monash.edu

Handy Hint for Paper Users:

Submitting Pink Operation forms and then using spreadsheets or the BSR-i for your follow-ups is easy and happily saves trees!

Posters and Flyers

The BSR's Protocol requires you to display a BSR poster at any rooms where you consult.

Patient flyers are to be given to all patients prior to surgery and should also be available at each of your locations. Contact the Registry if you require additional materials.



Contact Us:

T: 03 9903 0725 F: 03 9903 0717

Email: med-bsr@monash.edu

Level 6, 99 Commercial Road, Melbourne VIC 3004

Dr Jenifer Cottrell, Customer Relationship Manager

T: 03 9903 0721

Email: jenifer.cottrell@monash.edu



Current Hospital Status Report for the 150 Australian Hospitals with Surgeons Providing Bariatric Surgery

*Denotes figures include recently approved HealthScopesites

State	Approved Sites		Sites In Progress		Sites Remaining
	Not Contributing*	Contributing	Ramsay	Other	
ACT	1	0	0	2	0
NSW	18	7	10	3	9
NT	1	0	0	1	0
QLD	3	14	5	3	2
SA	0	8	0	1	1
TAS	1	4	0	0	0
VIC	8	27	3	4	0
WA	3	7	1	2	1
Total	35	67	19	16	13

Hospital Type	Approved Sites		Sites in Progress	Sites Remaining
	Not Contributing*	Contributing		
Public	6	18	11	5
Private	29	49	24	8
Total	35	67	35	13

Please see the end of this newsletter for complete list of approved hospital sites



Hospitals with Ethics Approval

1. Ashford Private Hospital
2. Austin Hospital
3. Austin Repatriation Hospital
4. Belmont District Hospital
5. Bethesda Hospital
6. Box Hill Hospital
7. Brisbane Waters Hospital
8. Cabrini Hospital Brighton
9. Cabrini Hospital Malvern
10. Calvary Central District Hospital
11. Calvary North Adelaide Hospital
12. Calvary Riverina Hospital
13. Calvary St Vincent's
14. Calvary Wakefield Hospital
15. Campbelltown Private Hospital
16. Castle Hill Day Surgery
17. Concord Repatriation General Hospital
18. Darwin Private Hospital
19. Epworth Eastern Hospital
20. Epworth Freemasons Hospital
21. Epworth Geelong Hospital
22. Epworth Richmond Hospital
23. Flinders Medical Centre
24. Flinders Private Hospital
25. Geelong Private Hospital
26. Gold Coast Private Hospital
27. Glen Iris Private
28. Gosford Private Hospital
29. Gosford Public Hospital
30. Greenslopes Private Hospital
31. Hamilton Hospital
32. Hobart Private Hospital
33. Hollywood Private Hospital
34. Holy Spirit Northside Hospital
35. Hospital for Specialist Surgery
36. Hurstville Private Hospital
37. Ipswich General Hospital
38. Jessie McPherson Private Hospital
39. John Fawkner Private Hospital
40. John Flynn Private Hospital
41. John Hunter Hospital
42. Joondalup Health Campus
43. Kawana Private Hospital
44. Knox Private Hospital
45. Latrobe Regional Hospital
46. Launceston General Hospital
47. Lingard Private Hospital
48. Maryvale Private Hospital
49. Mater Private North Sydney
50. Mater Misericordiae
Rockhampton
51. Mater Private Pimlico
52. Mildura Base Hospital
53. Mildura Private Hospital
54. Monash Medical Centre
55. The Mount Private Hospital
56. National Capital Private Hospital
57. Nepean Private Hospital
58. Newcastle Private Hospital
59. North Shore Private Hospital
60. North West Private (Brisbane)
Hospital

61. North West Private (Burnie) Hospital
62. Northpark Private Hospital
63. Norwest Private Hospital
64. Peninsula Private Hospital
65. Pindara Private Hospital
66. Port Macquarie Private Hospital
67. Prince of Wales Private Hospital
68. Princess Alexandra Hospital
69. Queen Elizabeth Hospital
70. Queen Elizabeth II Jubilee Hospital
71. Repatriation General Hospital
72. Royal Brisbane and Women's Hospital
73. Royal Hobart Hospital
74. Royal North Shore Hospital
75. Royal Prince Alfred Hospital
76. St Andrew's War Memorial Hospital
77. St George Private Hospital
78. St John of God Ballarat
79. St John of God Berwick
80. St John of God Bunbury
81. St John of God Geelong
82. St John of God Geraldton
83. St John of God Lawley
84. St John of God Murdoch
85. St John of God Subiaco
86. St John of God Warrnambool
87. St Vincent's Private Hospital – Fitzroy
88. St Vincent's Public Hospital
89. Sunnybank Private Hospital
90. Sunshine Coast Private Hospital
91. Sydney Adventist Hospital
92. Sydney Southwest Private Hospital
93. The Alfred Hospital
94. The Avenue Private Hospital
95. The Valley Private Hospital
96. The Wesley Hospital
97. Wagga Wagga Rural Referral Hospital
98. Waikiki Private Hospital
99. Wangaratta Private Hospital
100. Warringal Private Hospital
101. Western Private Hospital
102. Waverly Private Hospital