

Retained Foreign Object Audit Form

This sample form may be used for auditing events involving the unintentional retention of a foreign object. Complete one form for each type of retained object. This form may be modified per facility policy and procedure.

Name of Procedure: _____

Diagnosis for Which Procedure was Performed: _____

For Internal Facility Use

(e.g., patient identification/medical record number)

(For each section, check and/or comment on all that apply.)

Patient Risk Factors

- Emergency surgery
- Bleeding - specify estimated blood loss:
- Obesity - specify BMI or height and weight:
- Long procedure - specify hours and minutes:
- Conversion from closed to open procedure - specify procedures:
- Multiple procedures - list:
- Other (specify):

Comment

Retained Object

(Specify retained object size and/or instrument type in comments.)

- Sponge
- Needle
- Instrument
- Other (specify):

Location of Retained Object

(Identify specific location, if known, in comments.)

- Intracranial
- Oral
- Thoracic cavity
- Mediastinum
- Abdominal cavity
- Vagina
- Rectum
- Other (specify):

Continued . . .

Counts Performed

	Instruments	Needles	Sponges
Before the start of the procedure	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Before closure of a cavity within a cavity	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Before skin closure started	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
After removal of all instruments, if there is no closure	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
At skin closure	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Team Changes during Procedure (if applicable)

	Circulating nurse	Scrub tech	Surgeon
Between the first and second count	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Between the next to last and final count	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Response if any Count was Incorrect on the First Try (if applicable)

	Before the start of the procedure	Before closing cavity or wound	After skin closure or removal of instruments
Recount only, until count is correct	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Visually inspect and explore the primary open surgical site	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Visually inspect and explore all secondary open surgical sites (if present)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Search elsewhere in the operating room (OR)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Obtain an imaging study before closure of the skin or removal of all instruments	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Obtain an imaging study in the OR after closure of the skin or removal of all instruments	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Order an imaging study to be performed after departure from the OR	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Was the item found

in the patient by visual inspection and exploration of the surgical site?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
in the patient by an imaging study?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
elsewhere in the OR?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Did the found item make the count correct?

Yes	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
No	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Continued . . .

If Counts Were Correct on First Try after Closing the Cavity or Wound, Did the Surgeon

- visually inspect the surgical site for retained objects before closing?
- explore the surgical site for retained objects before closing?

If an Imaging Study Was Performed

- was the radiologist informed about what item was missing?
- was the imaging study reviewed by the surgeon
 - before closure of the skin or removal of all instruments?
 - in the OR after closure of the skin or removal of all instruments?
 - after the patient left the OR?
- was the imaging study reviewed by a radiologist
 - before closure of the skin or removal of all instruments?
 - in the OR after closure of the skin or removal of all instruments?
 - after the patient left the OR?
- was an official reading by radiologist performed
 - before closure of the skin or removal of all instruments?
 - in the OR after closure of the skin or removal of all instruments?
 - after the patient left the OR?

Was the Retained Object Detected

- on an imaging study? specify:
- on palpation?
- by visual inspection?
- during a reoperation for a complication?
- by other means? specify:

Comment

Disposition of the Retained Object

- Removed from natural orifice - specify:
- Removed endoscopically - specify procedure:
- Removed with minor surgery - specify procedure:
- Removed with minimally invasive surgery - specify procedure:
- Removed by interventional radiology - specify procedure:
- Removed by open surgery - specify procedure:
- Deliberately not removed - specify reason:
- Removal undecided - specify reason:
- Other (specify):

Comment

Was the Retained Object Removed

- in OR, before skin suturing was completed or all instruments removed?
- in OR, after skin closure was completed or all instruments removed, but before anesthesia was discontinued?
- before departure from OR, but after initial anesthesia was discontinued?

Continued . . .

Was the Retained Object Removed (continued)

- before departure from recovery area?
- during the postoperative hospital stay? specify number of days:
- after discharge from the facility? specify number of days:
- Other (specify):

Comment

Patient Outcome

- No medical consequences
- Pain - specify location:
- Perforation - specify site:
- Infection - specify site:
- Fistula - specify location:
- Increased length of stay
- Readmission
- Death
- Other (specify):

Comment

Why do you think the retained foreign object incident occur?

What actions were taken to prevent the retained foreign object from harming this patient?

More information is available online at <http://www.patientsafetyauthority.org>.

This form accompanies the following:

Beyond the count: preventing retention of foreign objects [online].

Pa Patient Saf Advis 2009 Jun [cited 2009 Jun 30].

Available from Internet: [http://www.patientsafetyauthority.org/ADVISORIES/AdvisoryLibrary/2009/Jun6\(2\)/Pages/39.aspx](http://www.patientsafetyauthority.org/ADVISORIES/AdvisoryLibrary/2009/Jun6(2)/Pages/39.aspx).