Repeat Preoperative Endoscopy After Regional Implementation of Electronic **Synoptic Endoscopy Reporting:** A Retrospective Comparative Study

Background:

Repeat endoscopy can result in treatment delays, patient discomfort, and risks of colonoscopy-related complications. Repeat preoperative endoscopy has been attributed to poor communication between endoscopists and surgeons. In January 2019, mandatory electronic synoptic reporting for endoscopy was implemented in our city to include elements consistent with quality indicators proposed in national guidelines.

Objective:

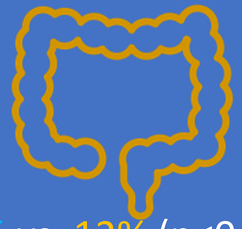
To assess whether the repeat preoperative endoscopy rate for colorectal lesions changed following mandatory synoptic report implementation.

Methods:

A retrospective chart review of all patients who underwent elective surgical resection for colorectal neoplasms from **January 2007 to June 2020** at St. Boniface Hospital in Winnipeg, MB, Canada.

115 Synoptic reports vs. 1314 Narrative reports

Endoscopy Quality Indicators:



84% vs. 12% (p<0.001)

Bowel Preparation Score Reported



70% vs. 49% (p=0.003)

Lesion Tattoo Documented

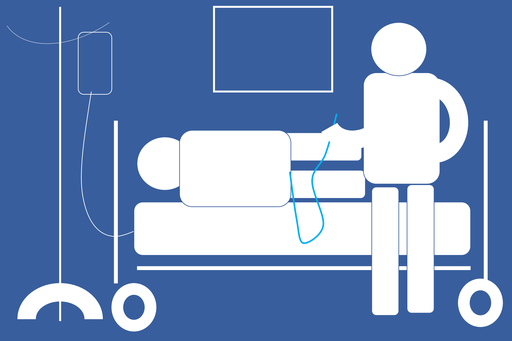


92% vs. 41% (p<0.001)

Lesion Photographed

No Difference in Repeat Preoperative Endoscopy rates

25% vs. 29% (p=0.381)



Conclusion:

Standardized reporting did not change high repeat preoperative endoscopy rates

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