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A quality improvement project: Engaging and educating our thyroidectomy patients

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Aims: Hypocalcaemia can occur in up to 30% of patients post-total thyroidectomy. Severe hypocalcaemia can lead to life-threatening tetany and seizures. As part of the consent process, risks are discussed typically face-to-face, often with the aid of anatomy illustrations. As tele-consultations become increasingly commonplace, patient-information leaflets (PILs) can be invaluable in enhancing informed consent, and empowering patients regarding their own care. We performed a quality improvement project to assess the feasibility and effects of distributing PILs following consultations to improve patients' understanding of post-operative complications (specifically hypocalcaemia).

Methods: A retrospective review of post-total thyroidectomy patients was performed from January 2019 to January 2020. A telephone survey was conducted to assess each patient's understanding of post-operative complications. As tele-consultations began to be utilised during the COVID-19 pandemic, we designed a simple PIL to distribute to patients awaiting elective total thyroidectomy aiming to improve health literacy. Following distribution of PILs, the survey was repeated to evaluate feasibility and effectiveness.

Results:

Question	Pre-intervention (n = 15)	Post-intervention (n = 8)
What complications can occur following a thyroid operation?	67% (10) able to describe ≥ 1 complication	86% (7) able to describe ≥ 1 complication
Do you know what can happen to your calcium levels?	73% (11) answered correctly	86% (7) answered correctly
What are the signs/symptoms of hypocalcaemia?	27% (4) able to describe ≥ 1 sign/symptom.	100% (8) able to describe ≥ 1 sign/symptom.

Conclusions: A simple and inexpensive intervention, PILs can be distributed to patients awaiting elective surgery to improve health literacy, and reduce potential patient harm.