

AB197. 231. The accuracy of the HIPE system in coding appendectomy procedures in the paediatric population in UHL

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Background: The Hospital Inpatient Enquiry (HIPE) administrative data provide the basis for the acute public hospital analyses. HIPE use discharge summaries and all other relevant clinical documentation to identify and code diagnoses and procedures for all patients. Resource allocation and planning of future services is dependent on current volumes of procedures. Appendectomy is one of the commonly performed procedures in every hospital. It can be performed open or laparoscopically. The aim of this study was to evaluate the accuracy of the HIPE system in recording open versus laparoscopic appendectomies in the paediatric population in University Hospital Limerick.

Methods: HIPE data on all paediatric (≤16 years of age) appendectomies (open and laparoscopic) performed between 01/01/2011 and 07/09/2016 was requested. The data was split into those coded as Laparoscopic Appendectomy 3057200 or Appendectomy 3057100 (Open).

A random selection of patients coded as Appendectomy was chosen. To determine whether these procedures were coded correctly, the HIPE records were compared to the procedure described in the operative note and in the theatre logbook.

Results: According to the HIPE data, 1,325 paediatric appendectomies were performed between 01/01/2011 and 07/09/2016. Seven hundred and thirty-seven (55.6%) were coded as laparoscopic appendectomies. Five hundred and eighty-three (44%) were coded as open appendectomies. A sample of 28 patients coded as open was randomly selected, and the procedures verified. Of the 28 recorded as open, 19 were performed open. The remaining 9 (32%) were performed laparoscopically.

Conclusions: This study identified levels of discordance between HIPE recorded data and medical records regarding the type of appendectomy performed in the paediatric population in UHL. These inaccuracies may be magnified on a regional and national level when pooling data. The inaccurate reflection of the complexity of surgery relative to the National Quality Assurance and Improvement System (NQAIS) data obtained through HIPE may result in underfunding to public hospitals.

Keywords: Hospital Inpatient Enquiry (HIPE); recording; appendicitis; accuracy

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