NFORC The National Facial and Oral Research Centre

BAOMS THE FACE OF SURGERY

QOMS Covid-19 OMFS trauma audit

Saving Faces The Facial Surgery Research Foundation

REDCap record ID ☐☐☐☐☐☐☐☐☐☐☐

Patient's details

Age at presentation (years) ☐☐   **Gender**   Female ☐   Male ☐   Other ☐

Number of days from presentation to treatment (treatment date minus presentation date, where presentation date is day = 0; if treated on the same day, write "Treated on the same day")   ☐☐

If admitted, indicate the number of days spent in hospital (discharge date minus admission date, where admission date is day = 0, if not admitted, write "N/A")   ☐☐

Case details

Is the patient currently being seen at a Hub or Peripheral hospital?   Hub ☐   Spoke ☐

Source of referral

Hub Emergency Department	☐	Spoke Emergency Department	☐
Transfer/referral from spoke OMFS	☐	Inpatient in Hub hospital	☐
Urgent Dental Care Centre	☐	Via 111 / Direct contact from patient	☐
Primary care - dentist	☐	Primary care - doctor	☐
Teir2/IMOS	☐		

Aetiology

Alleged assault with fist/feet	☐	Alleged assault with object/weapon	☐	
Animal/human bite	☐	Industrial injury	☐	
Mechanical fall	☐	Non-mechanical fall	☐	RTA ☐
Self-harm / suicide attempt	☐	Sports / Exercise / Accidental injury	☐	

Location where the injury took place: Indoor ☐   Outdoor ☐   Workplace ☐

If assaulted, by who? (optional)   Unknown ☐   Known ☐   Suspected domestic violence ☐

Patient's pre-treatment covid-19 status

Covid negative test ☐   Covid positive test ☐   Post-covid infection ☐   Unknown ☐

ASA status   ASA I ☐   ASA II ☐   ASA III ☐   ASA IV ☐   ASA V ☐

Presentation and treatment

Is the patient currently being seen at a Hub or Peripheral hospital?   Hub ☐   Spoke ☐

In the next sections, indicate the type(s) of injury, how they were treated (Covid) and how they would have been treated before the Covid-19 epidemic (Pre-Covid).

Presentation(s)		Intervention(s)	Covid	Pre-Covid
Dental Injury	☐	No intervention	☐	☐

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(Dental injury - continued)		
Splinting of teeth	☐	☐
Extraction(s)	☐	☐
Defer definitive treatment until after crisis	☐	N/A
Transfer to hub for definitive treatment	☐	☐

Laceration/incised wound face/neck ☐		
Laceration/incised wound face/neck with facial nerve injury ☐		
No intervention	☐	☐
Exploration of wound / arrest of haemorrhage	☐	☐
Steristrips/Tissue glue	☐	☐
Suturing	☐	☐
Exploration and repair of nerve	☐	☐
Defer definitive treatment until after the crisis	☐	N/A
Transfer to hub for definitive treatment	☐	☐

Le Fort/Naso-orbito-ethmoid (only) ☐		
Mandible: Condyle ☐		
Mandible: No malocclusion ☐		
Mandible: Mobile/malocclusion ☐		
Mandible AND other-face fracture(s) (choose treatment for mandible) ☐		
No intervention	☐	☐
Arch Bars with screws/wires	☐	☐
Leonard buttons / Eyelet wiring / Bonded brackets	☐	☐
IMF Screws	☐	☐
Bridle wire	☐	☐
Plate(s) & self-drilling screws	☐	☐
Plate(s), drill & screws	☐	☐
Extra-oral plate(s)	☐	☐
External fixator	☐	☐
Extraction	☐	☐
Defer definitive treatment until after the crisis	☐	N/A
Transfer to hub for definitive treatment	☐	☐

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		Covid	Pre-covid
Nasal Bone fractures (isolated)	No intervention	☐	☐
	Closed reduction (e.g. MUA nose)	☐	☐
	Defer definitive treatment until after the crisis	☐	N/A
	Transfer to hub for definitive treatment	☐	☐
Orbital Floor ☐	No intervention	☐	☐
	Exploration and repair with orbital implant	☐	☐
	Defer definitive treatment until after the crisis	☐	N/A
	Transfer to hub for definitive treatment	☐	☐
Zygomatic Complex (isolated) ☐	No intervention	☐	☐
	Closed reduction (e.g. elevation zygoma)	☐	☐
	Plate(s) & self-drilling screws	☐	☐
	Plate(s), drill & screws	☐	☐
	Defer definitive treatment until after the crisis	☐	☐
	Transfer to hub for definitive treatment	☐	☐

Anaesthetic

	Covid	Pre-covid		Covid	Pre-covid
None	☐	☐	LA in theatre	☐	☐
LA with sedation	☐	☐	GA - Daycase	☐	☐
LA in Outpatients	☐	☐	GA - Inpatients	☐	☐

Reason(s) why treatment and anaesthetic differ

No access to emergency theatre ☐   Applying COVID policy to treat only emergencies with minimum inpatient/theatre use ☐

Patient known COVID Positive ☐

Limiting activity to preserve stock of PPE ☐   Patient suspected COVID ☐   Avoiding AGP ☐