Situation: Intra-operative radiographs to exclude retained foreign bodies are currently being obtained without an image of the foreign body that is suspected to be missing.

Background: Radiologists are asked to review intra-operative films for potential retained foreign bodies without specific knowledge on what the potential foreign body looks like. Prior studies have shown improved detection rates of retained foreign objects when an image of the object is provided at same time as patient image. Several institutions across the nation have already adopted policies requiring imaging of the potential retained object whenever possible.

Assessment: Obtaining intra-operative radiographs for foreign bodies without obtaining an image of the object creates a potential safety threat where a retained object may be overlooked.

Recommendation: Starting May 24 2018 OR staff will be asked to provide the x-ray technologist with a duplicate of the missing object (whenever possible) for any intra-operative potential retained foreign body radiograph. An image of the patient and the missing object will be sent to PACS for radiologist review.

Flow map and contact information is attached.







