

## Forgotten Foreign Bodies (FFB) during Surgery and Malpractice

Fatin R Polat<sup>1\*</sup>, Esra Saka<sup>2</sup> and Yasin Duran<sup>1</sup>

<sup>1</sup>Department of Surgery, Tekirdag Namik Kemal University Medical Faculty, Tekirdag, Turkey

<sup>2</sup>Department of Forensic Medicine, Tekirdag Namik Kemal University Medical Faculty, Tekirdag, Turkey

**\*Corresponding Author:** Fatin R Polat, Associate Professor of Surgery, Department of General Surgery, Namik Kemal University School of Medicine, Tekirdag, Turkey.

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### Abstract

Forgotten foreign body in the abdomen is a big challenge for surgeon. The incidence of this condition can be reduced by taking some precautions after the surgery. The aim of this study is to evaluate effect forgotten foreign bodies generally, investigated the malpractices results.

**Keywords:** *Forgotten Foreign Bodies; Surgery; Malpractice*

### Introduction

Forgotten foreign body (FFB) such as surgical sponges and surgical instruments, in the abdomen may result in many complications in the gastrointestinal tract [1]. To prevent complications, intervention should be applied in suitable time. On the other hand, Because of it causes malpractice, the event may to be going court. The aim of this study is to evaluate effect forgotten foreign bodies generally, investigated the malpractices results.

**Etiology:** The risk of having a retained surgical item increases during emergency surgery, Unplanned changes in procedure, Patient with higher body mass index, Multiple surgeons involved in same operation, Multiple procedures performed on same patient, Involvement of multiple operating room nurses/staff members, Case duration covers multiple nursing "shifts" [1].

**Epidemiology:** The actual incidence of the retained foreign body at operation is difficult to estimate. Estimates of retained foreign bodies in surgical procedures range from one case per 8000 to 18,000 operations, corresponding to one case or more each year for a typical large hospital or approximately 1500 cases per year in the United States [1,2].

**Pathogenesis and diagnosis:** Forgotten foreign body may play an important role in the pathogenesis of abdominal infection and intestinal fistula [1,3]. In addition to may cause necrotic tissue, bowel obstruction, tumor-like lesion and sepsis. Sometimes it does not cause any complication. After the months or the years, it is diagnosed incidentally or during the scanning. Diagnosis is Forgotten foreign body diagnosis is usually made another hospital or surgeon. These situations are to be causes of lawsuits in surgery.

**Treatment:** When diagnosed forgotten foreign body should always be removed. To prevent complications, endoscopic or surgical (either open or laparoscopic) intervention should be applied.

### Prevention:

1. Security of the operating room should be taken,
2. Enter-exit of operating room should be check by nurse,
3. Surgical Counts. In a study, the “falsely correct count” in which a count is performed and declared correct when it is actually incorrect, occurred in 21% to 100% of cases in which a retained surgical item was found [4]. Surgical sponges and instruments should be count after surgery(at least two or more times in emergency or complicate surgery),
4. Surgical sponges and gase should be dye with radiolusen,
5. An abdominal plain x-ray graph may be applied to patient post-operative 1. Day routinely.

**Malpractice results:** The characteristics of the surgeon and their style, bedside manner, honesty, and confidence demonstrated in the management of the case can go a long way in averting a lawsuit or mitigating damages [2]. Compensation and imprisonment are changeable from country to country.

### Conflict of Interest

No conflict of interest was declared by the authors.

### Financial Disclosure

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