REPORTS

PASCOM-10: HOW TO REPORT YOUR PODIATRIC ACTIVITY & OUTCOMES

PASCOM has its origins as a paper-based audit of podiatric surgery dating back to the late 1990s. Since the early 2000s, PASCOM has been under the direction of the College of Podiatry. Following a major investment in the system, an online version was launched in May 2010, and made available to all members. The website is able to capture activity and patient-reported outcome measures (PROMS) for all elements of podiatry

ANTHONY MAHER

PODIATRIC SURGEON, NOTTINGHAMSHIRE HEALTHCARE NHS FOUNDATION TRUST

WHAT IS PASCOM-10?

PASCOM-10 is a database of foot treatment and outcomes. It can be adapted to suit various purposes but uses include audit and evaluation, a log book for reflective practice, a career-long clinical portfolio and a handy treatment summary generator for GP and patient correspondence.

WHAT DATA DOES PASCOM CAPTURE?

PASCOM-10 has seen 136 centres contribute data for 106,698 procedures up to December 2016. There has been a gradually increasing trend to recording more surgical admissions and related procedures over the last six years. However, the uptake for data collection of core (general) podiatry, MSK and wound care has been slow.



PASCOM DIAGNOSTICS

PASCOM records a range of medical and podiatric diagnostic codes using the ICD-10 classification. The top 10 diagnoses in both the invasive and non-invasive domains are presented right.

PASCOM PROCEDURES AND INVESTIGATIONS

Some 523 procedure codes can be recorded on PASCOM. The codes can be manually grouped, placing similar procedures in a single 'basket'. The result of this grouping is that the top 10 procedures account for 67% of all procedures recorded on PASCOM-10 (invasive domain).

PASCOM AND MEDICINES

PASCOM-10 can record the medicines supplied, administered or prescribed as part of a surgical episode of care. Crucially, PASCOM can identify how the drug was accessed, thus providing evidence in support of independent prescribing.

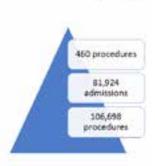
PASCOM COMPLICATIONS OF SURGERY

The PASCOM-10 system can collect data relating to 51 adverse events, sequellae and complications. The system highly user dependent, however, and only around 59% of episodes have outcome data recorded. Looking at the rates of specific complications, even where centres collect outcome data there is likely widespread under-reporting.

Atom Weaklyn Top-10		Invasive Top 10			
Foot Uliver (diabetes)	2	Hallus valgus			11798
Plantar fascitis	-	Hammer too(s)		1000	
Flat front		Hallux rigidue			
Outwornyelltis metalamah		Intendigital Neuroma	100		
Cores and collection		Ingrowing nall			
OA (og durual midfaret)		Fixetion related			
Synowitia of Jointa		DA - Mid foot	-		
Other acquired		Hallox valgos rigidos			
Hallox volgoo		Tailor's bunion	-		
Charoet's		Metatarialgia	E 23		

Procedure top 10 - invasive

Description	Count
Icard Akin Verlants	21545
lesser tox anthroplasty	12801
Lesser the funion	2047
Nail and size (-) pheneli	6348
Neurora excluios	5421
Lesier metaturis/convolutions	3684
Hardware exercical screen, pine, when and plates	later
Chellectory first Ray (proper) distal or previous	8421
Terstor repair	3272
Diffier HdV osteinomy	2583



Top 10 account for 67% of all procedures recorded on PASCOM

Complications of surgery - Top 10

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(iame)	Episodes	Epilodes N	Major complications
Joint pain and stiffness	931	2.4	
infection: suspected	924	2.4	
Pain: surgical site beyond six weeks	\$20	2.4	Sameralan II
Wound dehiscence	784	2.0	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
Sweling	748	1.5	
Scarline hypertrophy	604	1.5	and the second se
Surgery failed or reoccurrence	197	15	
Transfer metatarselgie	558	1.4	COLUMN DESIGNATION OF
Patient non compliance	391	1.00	
Fixation problem	370	0.95	0 02 04 06 08

MISSING DATA

As mentioned above, post-operative outcome data collection is a cause for concern. In the period 2010-2016 almost 60,000 episodes of surgery were recorded, but clinical outcome data are available for only 59% of these. PROM data in the form of the Manchester Oxford Foot/Ankle Questionnaire (MOXFQ) are missing for 53% of the cohort and satisfaction data in the form of the Patient Satisfaction Questionnaire (PSQ-10) are missing for 44% of the cohort.



