

Complications pathway and named contact

Standard operating procedure (SOP) | PRO-SOP-003

Document type	Standard operating procedure (SOP)
Title	Complications pathway and named contact
Document ID	{{facility.code}}-PRO-SOP-003
Version and status	1.0 Issued for use. Pending ASF Expert Committee ratification
Prepared by	{{roles.quality_lead.name}}, Quality lead
Reviewed by	{{roles.clinical_director.name}}, Clinical director Date: _____
Approver and signature	{{roles.clinical_director.name}}, Clinical director Signature: _____ Date: _____
Effective date	{{document.effective_date}}
Next review	{{document.review_date}} (12 months, or sooner after any incident or change)
Replaces	None (new document)
Standards and criteria supported	Standard 11 (Procedure Units), criterion 11.5
Evidence basis	E-006, E-009
Status of this document	Recommended best-practice model. A hospital may adopt, adapt or replace it with an equivalent that meets the same criteria.

At a glance: what to do

1. Each procedure has a written complications pathway, with a named contact reachable at the time of the procedure.
2. Serious reactions have a route to hospital, agreed in advance (AMC-SOP-001).
3. Each complication is recorded (PRO-FRM-004) with its outcome.
4. Each complication is reviewed within the set time.

Stop and get help straight away if: a serious complication has no named contact or route to hospital.

1. Purpose

To manage complications through a defined pathway, with a route to hospital (11.5).

2. Scope

Applies to	Clinical and support staff in the hospital
Locations	All wards, clinics and departments of {{facility.legal_name}}
When	Whenever the activity described is carried out
Does not apply to	Activities covered by another document listed in section 15

3. Definitions and abbreviations

Term	Meaning in this SOP
Clinical lead	The doctor or nurse in charge of the area at the time

4. Background and rationale

To manage complications through a defined pathway, with a route to hospital (11.5).

5. Responsibilities

Role	Duties in this SOP	Competence needed
Medical director	Owns the pathway and the hospital route	Clinician
Named contact	Available at the time of each procedure	Clinician

6. Equipment, materials and resources

Item	Specification or standard	Check before use
Records and forms named in this document	Current version	Checked before use

7. Safety and infection prevention

- Stop and call for help if a patient is at immediate risk. Do not delay urgent care to complete paperwork.

8. Before you start

- Confirm the forms and equipment named in this document are available and current.

9. Procedure

Follow the steps in order. Where a step says "If", take the action for the case that applies. Do not skip a step. If a step cannot be done, use section 11 and section 12.

Step	Action	How to do it	Key point
1	Name the contact.	• Name the on-call contact for each day of procedures and give the number to the team.	Named and reachable.
2	Follow the pathway.	• Treat the complication as the pathway sets, and transfer to hospital for a serious reaction.	Pathway, then hospital.
3	Record and review.	• Record each complication on PRO-FRM-004 and review it within the set time.	Recorded and reviewed.

Decision points

- No decision points in this procedure.

10. Special situations

Situation	What to do
Out of hours	Follow the same steps. Use the on-call contact on the wall of the area.

11. Problems and escalation

- Any serious problem goes to the duty clinical lead at once and to the clinical director the same day.

12. Monitoring and compliance

What is checked	Target	How often	Who	If the target is missed
Complications with a recorded outcome	100%	Monthly	Medical director	Escalate to chief executive

13. Records

Record	Where it is kept	Kept for
Record named in this document	Patient record or the area file	{{facility.records_retention_years}} years

14. Training and competence

- Staff are trained in this document at induction and refreshed each year, with a recorded competency check.

15. Related documents

ID	Title	Relationship
PRO-FRM-004	Complication record	Record
AMC-SOP-001	Clinic emergency response and transfer to hospital (existing, reused)	Procedure

16. Evidence

ID	Source and status
E-009	Based on the ASF Expert Committee consensus and the WHO Guidelines for Safe Surgical Care and Safe Procedures (2009).
E-006	ASF Policy Framework v1.2. Adapted.
E-009	ASF Expert Committee consensus.

EC = ASF Expert Committee consensus. Items marked EC are reviewed by the Committee each year.

17. Change history

Version	Date	What changed	Approver and signature
1.0	{{document.effective_date}}	First version	Pending Expert Committee approval