**WAASM audit process**

**Figure 2: WAASM audit process**

- The WAASM notified of all in-hospital deaths associated with surgical care (whether or not patient underwent a surgical procedure).
- SCF sent to surgeon for completion via electronic Fellows Interface. Surgeon required to provide details of any clinical management issues arising during patient care*.
- Complete electronic SCF returned to the WAASM for de-identification and coding.
- SCF sent for FLA via Fellows Interface.
- SLA required?
  - Yes
    - Medical records requested from treating hospital/s.
    - SCF and medical records sent for SLA.
    - Feedback to surgeon.
    - SLA appeal lodged?
      - Yes
        - Case closed.
      - No
        - Case closed.
  - No
    - Feedback to surgeon.
    - Case closed.

*Clinical Management Issues Assessment Criteria

- Area of consideration: where care could have been improved or different, but may be an area of debate.
- Area of concern: where care should have been better managed.
- Adverse event: an unintended injury caused by medical management rather than by disease process, which is sufficiently serious to lead to prolonged hospitalisation or to temporary or permanent impairment or disability of the patient at the time of discharge, or which contributes to or causes death.

WAASM: Western Australian Audit of Surgical Mortality; SCF: Surgical Case Form; FLA: First-line Assessment; SLA: Second-line Assessment; CNR: Case Note Review