



Manitoba Health supports reporting and learning from patient safety events. The focus of a patient safety review is to closely look at the health care system that surrounds and interacts with those giving and receiving care. The goal is to identify risks to patient safety and recommend the most effective ways to minimize risk and improve the delivery of healthcare.

Patient Safety Learning Advisory

Testicular Torsion

Summary:

A patient presented to an emergency department (E.D.) with complaints of a sudden onset of severe left testicular pain. According to the Canadian Triage Acuity Scale (CTAS) the patient was triaged as a level 2 = (emergent). The patient received an oral analgesic for pain and routine standing order bloodwork was performed. The patient then was seated in the waiting room to await a physicians assessment.

The E.D. at the time was extremely busy with an influx of patients with high acuity and no available beds in the department. There was only one physician on shift.

The patient remained in the waiting room and was observed by the Triage nurse. The patient's pain had improved over the course of a 9 hour wait. Upon physician assessment an urgent ultrasound was ordered and performed revealing testicular torsion. The patient was transferred to a tertiary care center to undergo an emergency orchiectomy of the left teste (surgical removal of a teste).

Keywords: Testicular Torsion

This review is based on a single event.

Findings of the Review:

Multiple high acuity patients in the department with only one E.D. physician increased the likelihood that the patient was not seen in a timely manner.

The impacts of the COVID pandemic affected a large number of newly hired nurses receiving the required E.D. Triage education.

Testicular torsion was not identified at time of triage.

System Learning:

Initiate “Team Huddles (Running the Board)” at the beginning of each shift handover and throughout the shift as deemed applicable in all regional E.D.’s.

Highlight Testicular Torsion in the “Triage Refresher Course” education that is currently under development.

Encourage all E.D. nurses that the “Triage Refresher Course” is available to take (once developed) every 2 years.

Revise the “Triage and Waiting Room Monitoring” policy (CLI.5110.PL.005) to indicate the importance of having CTAS trained E.D. nurses triage.

All E.D. nurses have CTAS training prior to working the triage desk.

SUGGESTIONS:

Promote the EDE2 (level 2 ultrasound) course to all E.D. physicians at the 3 regional sites.

Request that educators in the Service Delivery Organization (SDO) have access to the “Trainer” EDIS (Emergency Department Information System) education system.