Questionnaire for Quality Control Evaluation of Gastrointestinal Endoscopy in Gansu Province in 2022

The purpose of this questionnaire survey is to evaluate the quality control when performing gastrointestinal endoscopy techniques in hospitals at all levels in Gansu Province in 2022, and to provide assistance to further improve the quality of gastrointestinal endoscopy.

1. Your name?
2. Your contact information (cell phone number)?
3. Name of your hospital (full name)?
4. Total number of physicians in your hospital's gastrointestinal endoscopy center (persons)?
5. Physician education at your hospital's gastrointestinal endoscopy center (person, if none, please fill in 0)

   Dr. ( )

   Masters ( )

   Undergraduate ( )

   Specialized ( )

6. Title of physician at your hospital's gastrointestinal endoscopy center (person, if none, please fill in 0)

   Chief Physician ( )

   Deputy Chief Physician ( )

   Attending physician ( )

   Residents ( )

7. Total number of nurses in your hospital's gastrointestinal endoscopy center (persons)?
8. Title of nurse at your hospital's gastrointestinal endoscopy center (person, if none, please fill in 0)

   Chief Nurse ( )

   Associate Chief Nurse ( )

   Nurse Practitioner-in-Charge ( )

   Nurse Practitioner ( )

   Nurse ( )

9. Number of technologists in your hospital's gastrointestinal endoscopy center (0 if none)?
10. Your hospital's Gastrointestinal Endoscopy Center's examination program and workload in 2022 (cases, if not performed, please fill in 0)

    General gastroscopy ( )

    Painless gastroscopy ( )

    General colonoscopy ( )

    Painless colonoscopy ( )

    Ultrasound endoscopy ( )

    Small colonoscopy ( )

    Capsule endoscopy ( )

11. What is your hospital's Gastrointestinal Endoscopy Center's pathology biopsy sending unit?

    Separate pathology room for digestive endoscopy

    Department of Pathology of the host hospital

    Outgoing to other units

12. Your hospital's gastrointestinal endoscopy center's endoscopic treatment program and workload in

2022 (cases, if not performed, please fill in 0)

Endoscopic Mucosal Dissection (ESD Level IV) ( )

Endoscopic submucosal tumor resection (level IV) ( )

Endoscopic Tunneling Technique (Level IV) ( )

ERCP procedure (level IV) ( )

Ultrasound endoscopy (level IV) ( )

Endoscopic mucosal resection (level III) ( )

Endoscopic stenosis dilatation (level III) ( )

Endoscopic stenting (level III) ( )

Endoscopic sclerotherapy of esophageal varices with sclerotherapy injection and ligation (level III) ( )

Endoscopic Tissue Gel Injection for Fundic Varices (Level III) ( )

Endoscopic esophageal radiofrequency therapy (level III) ( )

Endoscopic photodynamic therapy (level III) ( )

Endoscopic percutaneous gastrojejunostomy (level III) ( )

Endoscopic foreign body removal (level III) ( )

Endoscopic hemostasis (level III) ( )

Colonoscopic mucosal resection (level III) ( )

Colonoscopic Stenosis Dilation and Stenting (Level III) ( )

Colonoscopic foreign body removal (level III) ( )

Colonoscopic hemostasis (level III) ( )

13. Quality rating of your hospital's gastrointestinal endoscopy center's 2022 consultation program

Number of cases of complete resection of ESD for early stage cancer of the GI tract (confirmed by pathology) (cases) ( )

Number of successful cases of ERCP choledochal lithotripsy (cases) ( )

Number of pathologically positive EUS-FNA specimens (cases) ( )

Number of detected cases of colonic adenomas (pathologically confirmed) (cases) ( )

Number of cases of serious complications related to gastrointestinal endoscopy (perforation, hemorrhage: hemoglobin drop of 20 g/L/hour, anesthesia accident) (cases) ( )

Success rate of colonoscopic cecal intubation (%) ( )

Rate (%) of colonoscopy exit time ≥6 minutes ( )

14. Number of cases of each type of gastrointestinal tumor found at your hospital in 2022 (cases, enter 0 if none found)

Early stage esophageal cancer ( )

Total number of esophageal cancer cases (including early stage esophageal cancer) ( )

Early Stage Stomach Cancer ( )

Total number of gastric cancer cases (including early gastric cancer) ( )

Early colorectal cancer ( )

Total number of colorectal cancer cases (including early colorectal cancer) ( )

15. What type of medication does your hospital use prior to gastroscopy? (Please fill in full name and manufacturer)

Local anesthetics (e.g., lidocaine)

Antifoam agents (e.g., simethicone)

Mucolytic agents (e.g., pronase)

Compound preparations (e.g., dacronine hydrochloride colloidal syrup)

16. What is your hospital's defoaming protocol during gastroscopy?

simple water injection

Endoscopic spraying of antifoaming agents (specify type and dose if available)

Dilute the defoamer and spray it (fill in the specific type of drug, dosage and water content)

17. What type of medication does your hospital use prior to colonoscopy? (Please fill in full name and manufacturer)

Intestinal laxatives (e.g., PEG)

Antifoam agents (e.g., simethicone)

sth. else

18. What is the dosage, concentration, and timing of the medication administered prior to the colonoscopy at your hospital?

Example: 3 sachets of PEG, each sachet dissolved in 1 liter of water, 1 sachet taken at 8:00 a.m. the day before the examination and 2 sachets at 6:00 a.m. on the morning of the examination.

19. What is your hospital's defoaming protocol during colonoscopy?

simple water injection

Endoscopic spraying of antifoam (fill in specific type and dose of medication used, if any)

Dilute the antifoam agent and spray it (please fill in the specific type, dosage and water content if available).