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[REDACTED]
RE: Freedom of Information Request

7th August 2024

Dear Sir/Madam

With reference to your request for information received on 9th February 2024, I can confirm in accordance with Section 1 (1) of the Freedom of Information Act 2000 that we do hold the information you have requested. A response to each part of your request is provided below. Please accept our sincere apologies for the delay.

In your request you asked:

Questions for clinical team(s):

1. **In 2022/2023 (or for the last recorded year with data available), in your Trust/Health Board, how many of the following did you record?**
 - a) Paediatric patients with suspected septic arthritis in native joints
 - b) Paediatric patients with suspected prosthetic joint infection (PJI)
 - c) Adult patients with suspected septic arthritis in native joints
 - d) Adult patients with suspected prosthetic joint infection (PJI)Information not held. We are unable to identify 'suspected', only diagnosed cases.

2. **Does your Trust/Health Board follow or have any locally developed/adapted guidelines for the diagnosis and treatment of septic arthritis in native joints and prosthetic joint infections in both adults and paediatric patients?**
 - a) **If yes, please state which guidelines have been adapted and please provide a copy of your local guidelines**
Please see FOI 53748 Accompanying document.

3. **When investigating suspected septic arthritis in native joints in both paediatric and adult patients, is a synovial fluid sample collected before or after antibiotics are administered and commenced?**

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- a) **Is joint aspirate collected in ED/triage, Assessment unit, inpatient ward, or theatre?**
It varies.
- b) **Who typically performs the procedure and collects the sample? (Please specify job role)**
Orthopaedics, rheumatology, A&E registrars and consultants
- c) **Does the above differ for suspected prosthetic joint infections? If yes, please clarify how this differs**
Only orthopaedics.
4. **What clinician would typically manage paediatric patients with suspected septic arthritis in native joints? (please select one or multiple)**
- i) Paediatric Consultant
 - ii) Orthopaedic Consultant - Yes
 - iii) Infectious Diseases Consultant
 - iv) Other (please specify)
5. **Are patients discharged before culture results from synovial fluid aspirate are received? If yes, what requirements need to be met before patients are discharged?**
Rheumatology Await culture results if advising medical teams. We do not have inpatients.

Orthopaedics – Patients can go home if able and are on a virtual ward and followed up when results are available.

Questions for lab/diagnostic team(s):

6. **For adult and paediatric patients with suspected septic arthritis of native joints, what are the mean turnaround times (in hours, or if more appropriate, working days) for results on the following tests from receipt of specimen: (please provide an answer for each result)**
- a) **Gram Stain**
3hr
 - b) **Culture**
24hr
 - c) **Blood culture**
48hr automatic reporting for negative.
 - d) **White blood cell count**
3hr only given in quantitative value Few, Moderate or numerous.
7. **Does your Trust/Health Board conduct PCR testing of bacteria from synovial fluid of patients who have suspected septic arthritis of native joints?**
If yes:
- a) **Is this testing conducted on site?**
No
 - b) **At what point is testing requested – when the culture is negative or on request?**
Clinical Interpretation.
 - c) **How long is the average turnaround time for results from receipt of specimen?**

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4 Days

- d) **What organisms are routinely tested for?**
16s PCR

8. Does your Trust/Health Board conduct 16S PCR testing of bacteria from synovial fluid of patients who have suspected septic arthritis of native joints?

Yes

If yes:

- a) **Is this testing conducted on site?**

No

- b) **At what point is testing requested – when the culture is negative or on request?**

Dependant on clinical history.

- c) **How long is the average turnaround time for results from receipt of specimen?**

4 Days.

- d) **What organisms are routinely tested for? Joint question – input from both clinician and lab/diagnostic team:**

16s PCR

9. For joint infections, in your Trust/Health Board, please confirm the following:

- a) **Which roles or stakeholders are involved in the design of diagnostic pathways and introducing change/pathway improvement?**

Microbiology Laboratory manager, Clinical lead consultant in Microbiology. Pathology Service lead. CSTO divisional team. Infection control Nurse consultant.

- b) **Which team(s) hold the budget for investing and implementing in new technologies across the pathway (e.g. rapid diagnostic testing)?**

Clinical Microbiology Service manager, CSTO (Clinical Support Therapies and Outpatient division)

I trust this information answers your request. Should you have any further enquiries or queries about this response please do not hesitate to contact me. However, if you are unhappy with the way in which your request has been handled, you have the right to ask for an internal review. Internal review requests should be submitted within two months of the date of receipt of the response to your original letter and should be addressed to: Sally Brook Shanahan, Director of Corporate Affairs, King's Mill Hospital, Mansfield Road, Sutton in Ashfield, Nottinghamshire, NG17 4JL or email sally.brookshanahan@nhs.net.

If you are dissatisfied with the outcome of the internal review, you can apply to the Information Commissioner's Office, who will consider whether we have complied with our obligations under the Act and can require us to remedy any problems. Generally, the Information Commissioner's Office cannot decide unless you have exhausted the internal review procedure. You can find out more about how to

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do this, and about the Act in general, on the Information Commissioner's Office website at:
<https://ico.org.uk/your-data-matters/official-information/>.

Complaints to the Information Commissioner's Office should be sent to FOI/EIR Complaints Resolution, Information Commissioner's Office, Wycliffe House, Water Lane, Wilmslow, Cheshire, SK9 5AF. Telephone 0303 1231113, email casework@ico.org.uk.

If you would like this letter or information in an alternative format, for example large print or easy read, or if you need help with communicating with us, for example because you use British Sign Language, please let us know. You can call us on 01623 672232 or email sfh-tr.foi.requests@nhs.net.

Yours faithfully

Information Governance Team

All information we have provided is subject to the provisions of the Re-use of Public Sector Information Regulations 2015. Accordingly, if the information has been made available for re-use under the [Open Government Licence](#) (OGL) a request to re-use is not required, but the licence conditions must be met. You must not re-use any previously unreleased information without having the consent from Sherwood Forest Hospitals NHS Foundation Trust. Should you wish to re-use previously unreleased information then you must make your request in writing. All requests for re-use will be responded to within 20 working days of receipt.

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