Data sheet – cycle 1

Audit: Appropriate use of FOBT for detecting colorectal cancer

Was the FOBT appropriate for this patient?

Patient	Aged >50 years YES/NO	No prior history YES/NO	Asymptomatic YES/NO	Not in the moderate or high-risk group YES/NO	Was testing appropriate? YES/NO
1					
2					
3					
4					
5					
6					
7					
8					
9					
10					
11					
12					
13					
14					
15					
16					
17					
18					
19					
20					
Total Yes					
% Yes					

Please retain this sheet for your records to provide evidence of participation in this audit:

Data sheet – cycle 2

Audit: Appropriate use of FOBT for detecting colorectal cancer

Was the FOBT appropriate for this patient?

Patient	Aged >50 years YES/NO	No prior history YES/NO	Asymptomatic YES/NO	Not in the moderate or high-risk group YES/NO	Was testing appropriate? YES/NO
1					
2					
3					
4					
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16					
17					
18					
19					
20					
Total Yes					
% Yes					

Please retain this sheet for your records to provide evidence of participation in this audit:

RNZCGP Summary Sheet – CQI Activity

DOCTORS NAME	

The activity was designed by (please tick appropriate box):

- ☐ RNZCGP
- ☑ Organisation e.g. IPA/PHO/BPAC (name of organisation)
- ☐ Individual (self)

bpac^{nz}

TOPIC	Appropriate use of FOBT for detecting colorectal cancer
Describe why you chose this topic (relevance, needs assessment etc):	

FIRST CYCLE

1. DATA	Information collected
Date of data collection:	
Please attach: ▪ A summary of data collected **or** ▪ If this is an organisation activity, attach a certificate of participation.	

2. CHECK	Describe any areas targeted for improvement as a result of the data collected.

3. ACTION	Describe how these improvements will be implemented.

4. MONITOR	Describe how well the change process is working. When will you undertake a second cycle?

Please retain this sheet for your records to provide evidence of participation in this audit:

SECOND CYCLE

1. DATA	Information collected

Date of data collection:

Please attach:
- A summary of data collected **or**
- If this is an organisation activity, attach a certificate of participation.

2. CHECK	Describe any areas targeted for improvement as a result of the data collected.

3. ACTION	Describe how these improvements will be implemented.

4. MONITOR	Describe how well the change process is working. Will you undertake another cycle?

COMMENTS	

Please retain this sheet for your records to provide evidence of participation in this audit: