

Dear [REDACTED]

I am writing to respond to your request [REDACTED] February 2016. Oxford University Hospitals NHS Foundation Trust can confirm that it holds the data that you requested.

TREATMENT OF ECTOPIC PREGNANCY IN YOUR UNIT.	HOSPITAL	Horton General Hospital (Oxford University Hospitals Trust)
In relation to the last 12 months:	Yes/No/%	Comments / explanation
Do you offer systemic methotrexate as a first-line treatment to women who are able to return for follow-up and who have all of the following: • no significant pain, and an unruptured ectopic pregnancy with an adnexal mass smaller than 35 mm with no visible heartbeat • a serum hCG level less than 1500 IU/litre?	Yes	
Do you offer the choice of either methotrexate or surgical management to women with an ectopic pregnancy who have a serum hCG level of at least 1500 IU/litre and less than 5000 IU/litre, who are able to return for follow-up and who meet all of the following criteria: • no significant pain and an unruptured ectopic pregnancy with an adnexal mass smaller than 35 mm with no visible heartbeat?	Yes	Practice varies between clinicians. Local guidelines are being developed and a decision is yet to be made on the upper hCG limit for methotrexate treatment. For now a limit of 3,000 IU/l is mostly used for Methotrexate.
What percentage of women have surgical treatment of their ectopic pregnancy performed by laparotomy?		Very rarely. Much less than 1%
What percentage of women have surgical treatment of their ectopic pregnancy completed laparoscopically?		Over 99%
What percentage of women have surgical treatment of their ectopic pregnancy initiated laparoscopically and converted to laparotomy?		Around 1%
Do you always have the correct equipment available to allow the laparoscopic treatment of ectopic pregnancy?	Yes	
Do you perform salpingectomy for women with an ectopic pregnancy and no clear risk factors for infertility?	Yes	
Do you perform salpingotomy for women with risk factors for infertility?	Yes	If the contralateral tube appears abnormal.
Please estimate the % of surgeons operating on ectopic pregnancies who you think can competently and confidently perform a salpingotomy?		Around 50% and mainly consultants.
What equipment / organizational / training issues could improve the laparoscopic treatment of your patients with an ectopic pregnancy?		Regular Simulation (laparoscopic) training Encouraging operating under consultant supervision to improve trainee confidence levels.
Thank you. This information will be used to inform the current national status of ectopic pregnancy treatment, and help units provide more comprehensive laparoscopic treatment for their women. Jim Clark. BSGE May 2016. RSVP to james.clark6@nhs.net .		

Please note that on 1 November 2011 the Oxford Radcliffe Hospitals NHS Trust (ORH) merged with the Nuffield Orthopaedic Hospital NHS Trust (NOC) to form the Oxford University Hospitals NHS Trust (OUH). Our response reflects these changes. Therefore, we consider that Oxford University Hospitals Trust has released to you all of the information that it holds in relation to your request.

Internal review

If you are dissatisfied with the service or response to your request you can ask for an internal review by writing to:

██████████ Director of Assurance, John Radcliffe Hospital, Headley Way, Headington, Oxford OX3 9DU.

If you remain dissatisfied with the handling of your request or complaint, you have a right to appeal to the Information Commissioner at:

The Information Commissioner's Office,
Wycliffe House, Water Lane,
Wilmslow,
Cheshire,
SK9 5AF.

Telephone: 0303 123 1113 Website: www.ico.gov.uk

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Yours sincerely,

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