

Clinicians reported benefit from students assisting with their service development project. Supervisors agreed that the teaching freed up time thus lessening the pressure of their clinical duties.

Conclusion Innovative approaches to placement models can be beneficial for both students and clinicians. The hybrid model approach should be considered to continue expansion of placement numbers, whilst maintaining a high standard of learning and promote non-clinical skills in preparation for the transition to qualified practitioners. In future, further placements should be implemented with continued feedback collection.

62 THE BECKWITH WIEDEMANN SYNDROME (BWS) TONGUE REDUCTION INTEGRATED CARE PATHWAY (ICP) PROJECT

Nick Sullivan, Sophie Grout, Johanna Andersson. *Great Ormond Street Hospital for Children NHS Foundation Trust, UK*

10.1136/bmjpo-2023-GOSH.54

BWS is a congenital overgrowth syndrome with a prevalence of 1 in 14,000. GOSH has been the Nationally designated BWS surgery service since 2012. This project involved a year-long collaboration between the EPR team, Transformation team and nursing staff to incorporate the Integrated Care Plan (ICP) into Epic. Feedback from parents on the ward said that the staff were lovely and very friendly, but knowledge of the condition could have been better due to some instances of missed analgesia. Over 90% of ward staff agreed adding ICPs directly into Epic was a good idea and only half of staff surveyed said they felt confident looking after these patients. Therefore, we also planned to deliver nurse education as part of the wider ICP project rollout.

The aim of this project was to:

- Standardise care on the post operative ward
- Reduce risk and variation in care
- Improve discharge
- Use the BWS service as a trial for EPR based ICPs before developing for other services that also used ICPs, but not built into Epic.

Results

- As of August, up to 40 Panther Ward nurses have been taught and the ICP project explained. This is over 80% of eligible staff.
- Since the 2nd iteration of using EPR ICPs in a live environment 100% of patients have had a completed ICP within their nursing documentation.

Conclusion

- We will continue to rollout and develop the ICP usage within the BWS service and other ICPs in other areas are now being developed, such as the tracheostomy ICP.
- Post operative nursing care has now been standardised for BWS surgery patients.
- Nurses have a greater knowledge of the condition which has also helped with patient satisfaction and outcomes.

65 AUTOMATIC EXTRACTION OF STRUCTURED INFORMATION FROM CARDIOLOGY MRI REPORTS

¹Sebin Sabu, ¹Pavithra Rajendra, ¹Andrew Taylor, ²Alexandros Zenonos, ²Rebecca Pope, ¹Neil J Sebire, ¹Anastassia Spiridou, ¹Daniel Key, ¹Shirin Patel. *¹DRIVE, Great Ormond Street Hospital for Children NHS Foundation Trust, UK; ²Roche Products Ltd, UK*

10.1136/bmjpo-2023-GOSH.55

Background Cardiac MRI reports contain rich structured information that can be valuable for research. However, such information is present only in documents (e.g., PDFs, Word) requiring manual extraction. Manual extraction of important clinical information from these reports is time and resource consuming, in a health service under intense pressure. We are developing an AI tool that accelerate automation of processing large volumes of reports and provides structured data. This data then can be easily accessible for research and other uses. The automated AI approach brings significant savings compared to the manual effort that would have required otherwise to input the data into a standard structured format, specifically for cardiac MRI reports.

Methodology Our AI tool makes use of natural language processing techniques (NLP), a subfield within artificial intelligence, which enables machines to understand human language. Our NLP-based pipeline, developed initially as a proof-of-concept, consists of: (1) automatically processing large volume of documents extracting various information (e.g., file details, sections, tables), (2) automatically extracting key information (e.g., patient details, checks, measurements). The above two sub-pipelines are modularised for usage beyond the scope of this project for processing other types of reports or documents. The pipeline incorporates several methods that range from conducting a simple logic step (e.g., rule-based) to complex NLP-based approaches (e.g., using large language models) within a fully automated and optimised flow.

This tool will be deployed in the new GOSH DRE development environment for processing approximately 10,000 cardiac MRI reports.

This project has been completed by Great Ormond Street Hospital NHS Foundation Trust and Roche Products Ltd as part of a collaborative working agreement. Roche Products Ltd had no influence on the results or decision to publish regarding this work.

70 REVIEW OF CURRENT CLINICAL PRACTICE IN GENETIC TESTING FOR PRADER WILLI SYNDROME

¹Ratha Sritharan, ²Deborah Morrogh²Zoe Allen, ¹Shereen Tadros, ¹Lara Menzies. *¹Clinical Genetics, Great Ormond Street Hospital for Children NHS Foundation Trust, UK; ²Great Ormond Street Hospital for Children NHS Foundation Trust, UK and North East Thames Regional Genetics Service, UK*

10.1136/bmjpo-2023-GOSH.56

Introduction Prader-Willi syndrome (PWS) is a multisystem genetic disorder arising from lack of expression of paternally inherited imprinted genes on chromosome 15q11-q13.¹ The characteristic phenotype includes severe neonatal hypotonia, hyperphagia and childhood obesity, short stature, hypogonadism, learning disabilities and behavioural difficulties.