

Testicular torsion study: Reviewer assessment form

A. Study inclusion and reviewer details

What is this study about?

The aim of this study is to review the pathway and quality of care in patients (children and young people) admitted to hospital with testicular torsion or pain leading to testicular torsion.

Inclusions

Patients aged between 2 - 24 years (inclusive) admitted to hospital with a diagnosis of testicular torsion, who underwent one of the included procedures, between the 1st April 2021 - 31st March 2022.

1. Name of reviewer

2. Date of review meeting

3. Site ID

6 digit number beginning with 3 on the front of the folder

Value should be between 300,000 and 399,999

4. Trust ID

6 digit number beginning with 2 on the front of the folder

Value should be between 200,000 and 299,999

B. Patient details

Unable to answer

Please use the 'unable to answer' box if there is not enough information available in the notes to answer the question, or the part of the notes needed to answer the question have not been returned, or if there is not enough detail to form an opinion

1. Age at admission

 years

Value should be between 2 and 24

Unknown

2. Sex

Male

Female

Other

Unable to answer

3. Diagnosis

Left testicular torsion

Right testicular torsion

Bilateral testicular torsion

Unable to answer

If not listed above, please specify here...

4a. Did the patient have an operation for testicular torsion during this admission?

Yes

No

Unable to answer

4b. What operation was undertaken?

Orchiectomy

Unilateral orchidopexy

Unknown

Orchiectomy and contralateral orchidopexy

Bilateral orchidopexy

If not listed above, please specify here...

C. Summary of key dates and times

Please take a few minutes to read through the notes and familiarise yourself with the information available to you. As you go through the notes please record the following dates and times:

1a. Date the symptoms started (approximately):

Unknown

1b. Time the symptoms started (approximately):

Unknown

2a. Date the patient first reported symptoms to someone (approximately):

The first person they told - this could be a parent carer, someone in school/college or health care professional

Unknown

2b. Time the patient first report symptoms to someone (approximately):

The first person they told - this could be a parent carer, someone in school/college or health care professional

Unknown

2c. To whom did they report symptoms?

Parent carer

Other relative

Friend

School/College staff

NHS 111

GP

Unknown

If not listed above, please specify here...

3a. Date the patient first reported symptoms to a healthcare professional (approximately):

This may be the same answer as the previous question

Unknown

3b. Time the patient first reported symptoms to a healthcare professional (approximately):

This may be the same answer as the previous question

Unknown

4a. Was the patient transferred from another hospital?

Yes

No

Unable to answer

4b. If answered "Yes" to [4a] then:

Date of referral:

Unknown

4c. If answered "Yes" to [4a] then:

Time of referral:

Unknown

At the operating hospital

5a. Date of arrival:

Unknown

5b. Time of arrival:

Unknown

6a. Date of the first assessment on arrival:

Unknown

6b. Time of the first assessment on arrival:

Unknown

6c. Grade of clinician undertaking the first assessment on arrival:

- Consultant
- Staff grade/Associate specialist
- Trainee with CCT
- Senior specialist trainee (ST3+ or equivalent)
- Junior specialist trainee (ST1 & ST2 or CT equivalent)
- Specialist nurse (Nurse consultant, Nurse practitioner, Clinical nurse specialist etc.)
- Senior staff nurse, enrolled nurse
- Unknown

If not listed above, please specify here...

6d. Specialty of clinician undertaking the first assessment on arrival:

- Emergency medicine
- General surgery
- Urology
- Paediatrics
- Paediatric surgery
- Unknown

If not listed above, please specify here...

7a. Date of the first ST3+ or equivalent review following arrival:

This may be the same date as question 6a. If not reviewed by a clinician ST3+ or equivalent following arrival, please mark as not applicable

Not Applicable Unknown

7b. Time of the first ST3+ or equivalent review following arrival:

This may be the same time as question 6b. If not reviewed by a clinician ST3+ or equivalent following arrival, please mark as not applicable

Not Applicable Unknown

7c. Specialty of the clinician undertaking the first ST3+ or equivalent review following arrival:

This may be the same specialty as question 6d. If not reviewed by a clinician ST3+ or equivalent following arrival, please mark as not applicable

- General surgery
- Urology
- Emergency medicine
- Paediatrics
- Paediatric surgery
- Unknown
- Not applicable - not reviewed by ST3+ or equivalent

If not listed above, please specify here...

8a. If answered "Emergency medicine", "Paediatrics", "Unknown" or "Not applicable - not reviewed by ST3+ or equivalent" to [7c] then:

Date of the first ST3+ or equivalent SURGICAL review following arrival:

If not reviewed by a surgical clinician ST3+ or equivalent following arrival, please mark as not applicable

Not Applicable Unknown

8b. If answered "Emergency medicine", "Paediatrics", "Unknown" or "Not applicable - not reviewed by ST3+ or equivalent" to [7c] then:

Time of the first ST3+ or equivalent SURGICAL review following arrival:

If not reviewed by a surgical clinician ST3+ or equivalent following arrival, please mark as not applicable

Not Applicable Unknown

8c. If answered "Emergency medicine", "Paediatrics", "Unknown" or "Not applicable - not reviewed by ST3+ or equivalent" to [7c] then:

Specialty of the first ST3+ or equivalent SURGICAL review following arrival:

If not reviewed by a surgical clinician ST3+ or equivalent following arrival, please mark as not applicable

- General surgery
- Urology
- Paediatric surgery
- Unknown
- Not applicable - not reviewed by surgical clinician ST3+ or equivalent

If not listed above, please specify here...

9a. Date of the first CONSULTANT review following arrival:

This may be the same date as question 6a or 7a or 8a. If not reviewed by a consultant following arrival, please mark as not applicable

Not Applicable Unknown

9b. Time of the first CONSULTANT review following arrival:

This may be the same time as question 6b or 7b or 8b. If not reviewed by a consultant following arrival, please mark as not applicable

Not Applicable Unknown

9c. Specialty of the first CONSULTANT review following arrival:

This may be the same date as question 6c or 7c or 8c. If not reviewed by a consultant following arrival, please mark as not applicable

- General surgery
- Emergency medicine
- Paediatric surgery
- Not applicable - not reviewed by a consultant
- Urology
- Paediatrics
- Unknown

If not listed above, please specify here...

10a. Date of decision to operate:

Unknown

10b. Time of decision to operate:

Unknown

11a. Date of operation:

Unknown

11b. Time of operation:

Unknown

11c. Grade of operating clinician:

- Consultant
- Staff grade/Associate specialist
- Trainee with CCT
- Senior specialist trainee (ST3+ or equivalent)
- Junior specialist trainee (ST1 & ST2 or CT equivalent)
- Specialist nurse (Nurse consultant, Nurse practitioner, Clinical nurse specialist)
- Senior staff nurse, enrolled nurse)
- Unable to answer

If not listed above, please specify here...

11d. Specialty of operating clinician:

- General surgery
- Urology
- Paediatric surgery
- Unable to answer

If not listed above, please specify here...

1a. In your opinion, were there any missed opportunities to recognise testicular torsion prior to admission? (Please tick all that apply)

- Yes - from the patient Yes - from the parent carers Yes - from the school
 Yes - from the GP Yes - other No
 Unable to answer

1b. If answered "Yes - from the patient", "Yes - from the parent carers", "Yes - from the school", "Yes - from the GP" or "Yes - other" to [1a] then:

If YES, please give further details:

2a. Was there a delay in the time to referral to hospital?

- Yes - from NHS 111
 Yes - from primary care
 Yes - from an urgent treatment centre
 Yes - from the patient
 Yes - from parent carers
 Yes - other
 No
 Unable to answer
 Not applicable - patient went straight to hospital

2b. If answered "Yes - from NHS 111", "Yes - from primary care", "Yes - from an urgent treatment centre", "Yes - from the patient", "Yes - from parent carers" or "Yes - other" to [2a] then:

How long was the delay in the time to referral to hospital?

- <1 hour 1-4 hours 4-6 hours >6 hours
 ≥ 1 day Unknown

2c. If answered "Yes - from NHS 111", "Yes - from primary care", "Yes - from an urgent treatment centre", "Yes - from the patient", "Yes - from parent carers" or "Yes - other" to [2a] then:

If YES, please expand on your answer:

3a. If there evidence in the notes that the patient sought medical advice prior to hospital admission?

Yes No Unknown

**3b. If answered "Yes" to [3a] then:
If YES, was there a delay in seeking advice?**

Yes No Unknown

**3c. If answered "Yes" to [3a] and "Yes" to [3b] then:
If YES, please estimate the length of the delay:**

Hours Unknown

4a. Is there evidence in the notes that the patient had attended the GP, Emergency Department or hospital in the week prior to admission, with symptoms which could have indicated testicular torsion (eg testicular or abdominal pain)? (Please tick all that apply)

Yes No Unable to answer

**4b. If answered "Yes" to [4a] then:
If YES, were the testicles examined at the time?**

Yes No Unable to answer

**4c. If answered "Yes" to [4a] then:
If YES, in your opinion was there a delay in referral by the previous clinician?**

Yes No Unable to answer

**4d. If answered "Yes" to [4a] and "Yes" to [4c] then:
If YES, where did this delay occur? (Please tick all that apply)**

GP Emergency department Surgical assessment unit
 Paediatric assessment unit Unknown

Please specify any additional options here...

**4e. If answered "Yes" to [4a] and "Yes" to [4c] then:
If YES, please estimate the length of the delay:**

Hours Unknown

E. Arrival at hospital

1. If referred to hospital via NHS 111, were they referred to the:

- Emergency department Surgical assessment unit Paediatric assessment unit
 Unknown NA - not referred via NHS 111

If not listed above, please specify here...

2. If referred to hospital via their GP 111, was the patient referred to the:

- Emergency department Surgical assessment unit
 Paediatric assessment unit Unknown
 Not applicable - not referred via the GP

3a. In your opinion did any triage or streaming process delay assessment?

- Yes No Unable to answer

3b. If answered "Yes" to [3a] then:

If YES, please expand on your answer:

4a. Was the patient transferred from another hospital?

- Yes No Unable to answer

4b. If answered "Yes" to [4a] then:

If YES to 2a, what was the reason for the transfer? (Please tick all that apply)

- No surgeon competent in torsion management
 No anaesthetist competent to anaesthetise patient
 No emergency surgical services on this site Unable to answer

Please specify any additional options here...

4c. If answered "Yes" to [4a] then:

If YES to 2a, in your opinion was this transfer appropriate?

- Yes No Unable to answer

4d. If answered "Yes" to [4a] then:

If YES to 2a, did waiting for the transfer delay arrival?

- Yes No Unable to answer

4e. If answered "Yes" to [4a] and "Yes" to [4d] then:

If YES to 2d, please estimate the length of the delay:

Hours Unknown

4f. If answered "Yes" to [4a] then:

If YES to 2a, did the transfer affect the outcome?

Yes

No

Unable to answer

4g. If answered "Yes" to [4a] and "Yes" to [4f] then:

If YES to 2f, how did this transfer impact on the care of the patient?

5a. In your opinion, was there a delay in arrival?

Yes

No

Unable to answer

5b. If answered "Yes" to [5a] then:

If YES, please estimate the length of the delay:

Hours

Unknown

Initial assessment on arrival

1a. In your opinion, was the initial assessment satisfactory?

- Yes No Unable to answer

**1b. If answered "No" to [1a] then:
If NO, please expand on your answer:**

2a. In your opinion, was there a delay in recognising testicular torsion at the time of initial assessment?

- Yes No Unable to answer

**2b. If answered "Yes" to [2a] then:
If YES to 2a, did this impact on the care of the patient?**

- Yes No Unable to answer

**2c. If answered "Yes" to [2a] and "Yes" to [2b] then:
If YES to 2b, please expand on your answer:**

3a. Were any of the following investigations undertaken unnecessarily?

- Ultrasound scan Urinalysis
 No investigations undertaken unnecessarily Unable to answer

Please specify any additional options here...

**3b. If answered "Ultrasound scan" or "Urinalysis" to [3a] then:
If YES, please expand on your answer:**

4a. In your opinion were all necessary investigations performed?

Yes No Unable to answer

**4b. If answered "No" to [4a] then:
If NO, please specify which investigations were not undertaken: (Please tick all that apply)**

Ultrasound scan Urinalysis Unable to answer

Please specify any additional options here...

**4c. If answered "No" to [4a] then:
If NO, please expand on your answer:**

5a. In your opinion was the initial assessment performed by the most appropriate clinician?

Yes No Unable to answer

**5b. If answered "No" to [5a] then:
If NO, please expand on your answer:**

Following the initial assessment on arrival

6a. Was the patient commenced on a dedicated pathway for testicular torsion?

- Yes No Unable to answer

6b. If answered "No" to [6a] then:

If NO, in your opinion should they have been?

- Yes No Unable to answer
-

7a. In your opinion, was there a delay in the first ST3+ or equivalent review?

- Yes No Unable to answer

7b. If answered "Yes" to [7a] then:

If YES (delay in ST3+ review), did this impact on the care of the patient?

- Yes No Unable to answer

7c. If answered "Yes" to [7a] and "Yes" to [7b] then:

If YES (delay in ST3+ review), please expand on your answer

8a. In your opinion, was there a delay in surgical assessment?

- Yes No Unable to answer

8b. If answered "Yes" to [8a] then:

If YES to 6a, please expand on your answer:

9a. 1. Was the patient seen by a consultant?

- Yes No Unable to answer

9b. If answered "No" to [9a] then:

2.If NO (wasn't seen by a consultant), should they have been?

- Yes No Unable to answer

9c. If answered "No" to [9a] and "Yes" to [9b] then:

3. If YES (should have been seen by a consultant), please expand on your answer

9d. If answered "Yes" to [9a] then:

4. If YES (seen by consultant), was there a delay in review?

Yes No Unable to answer

9e. If answered "Yes" to [9a] and "Yes" to [9d] then:

5. If YES (delay in consultant review), did this impact on the care of the patient?

Yes No Unable to answer

9f. If answered "Yes" to [9a] and "Yes" to [9d] and "Yes" to [9e] then:

6. If YES (delay in consultant review), please expand on your answer

G. Admission to the ward

1. Was the patient admitted to a ward prior to going to theatre?

- Yes No (admitted directly to theatre)
 Unable to answer

2a. If answered "Yes" to [1] then:

In your opinion, was the patient admitted under the correct specialty?

- Yes No Unable to answer

2b. If answered "No" to [2a] and "Yes" to [1] then:

If NO, please expand on your answer:

3a. If answered "Yes" to [1] then:

In your opinion, was the patient admitted to the appropriate ward?

- Yes No Unable to answer

3b. If answered "No" to [3a] and "Yes" to [1] then:

If NO, please expand on your answer:

1a. Is there evidence in the notes that a clinical risk score for testicular torsion was calculated during the admission?

- Yes - Twist Yes - other No Unable to answer

**1b. If answered "Yes - Twist" or "Yes - other" to [1a] then:
If YES, when was it calculated? (Please tick all that apply)**

- Prior to arrival in hospital During the initial assessment on arrival
 On admission Unable to answer

**1c. If answered "Yes - Twist" or "Yes - other" to [1a] then:
If YES, is there evidence in the notes that it aided decision-making?**

- Yes No Unable to answer
-

2a. In your opinion, was there a delay in making a diagnosis?

- Yes No Unable to answer

**2b. If answered "Yes" to [2a] then:
If YES, please expand on your answer:**

**2c. If answered "Yes" to [2a] then:
If YES to 2a, in your opinion did this impact on the care of the patient?**

- Yes No Unable to answer

**2d. If answered "Yes" to [2a] and "Yes" to [2c] then:
If YES, please expand on your answer:**

1a. Was there a delay in decision-making?

- Yes No Unable to answer

1b. If answered "Yes" to [1a] then:

If YES, did this impact on the care of the patient?

- Yes No Unable to answer

1c. If answered "Yes" to [1a] and "Yes" to [1b] then:

If YES to 1b Please expand on your answer:

2a. In your opinion, was there an inappropriate delay in treatment (excluding time to operation)?

- Yes No Unable to answer

2b. If answered "Yes" to [2a] then:

If YES, please expand on your answer:

2c. If answered "Yes" to [2a] then:

If YES to 2a, in your opinion did this impact on the care of the patient?

- Yes No Unable to answer

2d. If answered "Yes" to [2a] and "Yes" to [2c] then:

If YES, please expand on your answer:

3a. In your opinion, was there adequate shared decision-making between the patient, family and professionals?

Yes

No

Unable to answer

**3b. If answered "No" to [3a] then:
If NO, please expand on your answer:**

1a. In your opinion was consent taken appropriately?

- Yes No Unable to answer

1b. If answered "No" to [1a] then:

If NO, please expand on your answer:

2a. Was a WHO surgical checklist returned to NCEPOD?

- Yes No

2b. If answered "Yes" to [2a] then:

If YES, is there evidence that it was used?

- Yes No

3a. In your opinion, was the correct operation carried out? (i.e. were both sides explored/fixed)

- Yes No Unable to answer

3b. If answered "No" to [3a] then:

If NO, please expand on your answer:

4a. In your opinion, was the grade of the operating surgeon appropriate?

- Yes No Unable to answer

**4b. If answered "No" to [4a] then:
If NO, please expand on your answer:**

4c. In your opinion, was the sub-specialty of the operating surgeon appropriate?

- Yes No Unable to answer

**4d. If answered "No" to [4c] then:
If NO, please expand on your answer:**

5a. In your opinion, was the grade of anaesthetist appropriate? (I.e. ST4+ or directly supervised by consultant)

- Yes No Unable to answer

**5b. If answered "No" to [5a] then:
If NO, please expand on your answer:**

6a. In your opinion, was the timing of surgery (including the timing from decision to operate to time of operation) appropriate?

- Yes No Unable to answer

6b. If answered "No" to [6a] then:

If NO, what was this delay due to? (Please tick all that apply)

Non-availability of surgeon

Non-availability of anaesthetist

Unable to answer

Please specify any additional options here...

6c. If answered "No" to [6a] then:

If NO, please expand on your answer:

6d. If answered "No" to [6a] then:

If NO, in your opinion did the delay impact on the care of the patient?

Yes

No

Unable to answer

6e. If answered "No" to [6a] and "Yes" to [6d] then:

If YES, please expand on your answer:

1a. In your opinion, did lack of clinician experience result in delays to treatment?

- Yes No Unable to answer

1b. If answered "Yes" to [1a] then:

If YES, please expand on your answer:

1c. If answered "Yes" to [1a] then:

If YES to 2a, in your opinion did this impact on the care of the patient?

- Yes No Unable to answer

1d. If answered "Yes" to [1a] and "Yes" to [1c] then:

If YES, please expand on your answer:

2a. In your opinion were there any avoidable delays in treatment of this patient?

- Yes No Unable to answer

2b. If answered "Yes" to [2a] then:

If YES, please expand on your answer:

2c. If answered "Yes" to [2a] then:

If YES to 3a, in your opinion did this impact on the care of the patient?

- Yes No Unable to answer

**2d. If answered "Yes" to [2a] and "Yes" to [2c] then:
If YES, please expand on your answer:**

3a. In your opinion, were there any avoidable complications during this admission?

Yes No Unable to answer

**3b. If answered "Yes" to [3a] then:
If YES, please expand on your answer:**

4a. Was appropriate postoperative psychological support offered for this patient?

Yes No Unable to answer
 Not applicable - not needed

**4b. If answered "No" to [4a] then:
If NO, please expand on your answer:**

5a. If the patient had an orchidectomy, in your opinion were options for prosthetic replacement adequately explained to patient and family?

Yes No Unable to answer Not applicable

**5b. If answered "No" to [5a] then:
If NO, please expand on your answer:**

6a. In your opinion, was adequate information regarding fertility given to patient and family?

Yes No Unable to answer

**6b. If answered "No" to [6a] then:
If NO, please expand on your answer:**

7a. In your opinion was adequate written patient information given to the patient and family?

Yes No Unable to answer

**7b. If answered "No" to [7a] then:
If NO, please expand on your answer:**

1a. Was a discharge summary returned to NCEPOD?

- Yes No

1b. If answered "Yes" to [1a] then:

If YES, in your opinion, was the discharge summary adequate?

- Yes No

2a. At discharge, in your opinion were the patient and family given appropriate advice regarding surgery, its effects and future care?

- Yes No Unable to answer

2b. If answered "No" to [2a] then:

If NO, please expand on your answer:

3a. Was the patient offered a follow-up appointment within 6 months of surgery?

- Yes No Unable to answer

3b. If answered "No" to [3a] then:

If NO in your opinion should they have been?

- Yes No Unable to answer

4a. Was the patient's care discussed at multidisciplinary review/audit/mortality meeting?

- Yes No Unable to answer

4b. If answered "No" to [4a] then:

If NO in your opinion should they have been?

4c. If answered "Yes" to [4a] then:

If YES to 4a, in your opinion did adequate learning occur?

- Yes No Unable to answer

**4d. If answered "Yes" to [4a] and "No" to [4c] then:
If NO, please expand on your answer:**

5a. Was a serious incident declared in this case?

Yes No Unable to answer

**5b. If answered "No" to [5a] then:
If NO in your opinion should they have been?**

Yes No Unable to answer

**5c. If answered "No" to [5a] and "Yes" to [5b] then:
If YES, please expand on your answer:**

M. Overall quality of care

Please use the following grading to rate the overall quality of care received by this patient

GOOD PRACTICE: A standard that you would accept from yourself, your trainees and your institution

ROOM FOR IMPROVEMENT: Aspects of CLINICAL care that could have been better

ROOM FOR IMPROVEMENT: Aspects of ORGANISATIONAL care that could have been better

ROOM FOR IMPROVEMENT: Aspects of CLINICAL AND ORGANISATIONAL care that could have been better

LESS THAN SATISFACTORY: Several aspects of clinical and/or organisational care that were well below that you would accept from yourself, your trainees and your institution.

INSUFFICIENT DATA: Insufficient information submitted to NCEPOD to assess the quality of care

1a. Please rate the overall quality of care using the grading system provided

- Good practice
- Room for improvement in clinical aspects of care
- Room for improvement in organisational aspects of care
- Room for improvement in clinical AND organisational aspects of care
- Less than satisfactory
- Insufficient data to grade

1b. Please provide reasons for this grade

2a. Are there any themes/ issues from this case you feel should be highlighted in the final report?

- Yes No

2b. If answered "Yes" to [2a] then: Please expand on your answer

3. Do you think we should use this case as an illustrative vignette/ case study in the report?

- Yes No

4a. During review of this case did you notice any evidence of one or more health inequality or bias that impacted on the care provided?

- Yes No Unable to answer

4b. If answered "Yes" to [4a] then:

What health inequalities exist in relation to this patient?

- | | |
|---|---|
| <input type="checkbox"/> Age | <input type="checkbox"/> Disability - physical |
| <input type="checkbox"/> Disability - learning/cognitive | <input type="checkbox"/> Gender reassignment |
| <input type="checkbox"/> Marriage and civil partnership | <input type="checkbox"/> Pregnancy and maternity |
| <input type="checkbox"/> Race | <input type="checkbox"/> Religion or belief |
| <input type="checkbox"/> Sex | <input type="checkbox"/> Sexual orientation |
| <input type="checkbox"/> Socioeconomic status | <input type="checkbox"/> Geographic deprivation |
| <input type="checkbox"/> Part of a vulnerable or inclusion health group | <input type="checkbox"/> Severe mental illness |
| <input type="checkbox"/> Chronic respiratory disease | <input type="checkbox"/> Early cancer diagnosis |
| <input type="checkbox"/> Hypertension case finding | <input type="checkbox"/> English not first language |

Please specify any additional options here...

4c. If answered "Yes" to [4a] and "Part of a vulnerable or inclusion health group" to [4b] then:

If 'part of a vulnerable or inclusion health group' which group?

- | | |
|--|--|
| <input type="checkbox"/> Homelessness | <input type="checkbox"/> Drug and alcohol dependence |
| <input type="checkbox"/> Vulnerable migrants | <input type="checkbox"/> Gypsy, Roma and Traveller communities |
| <input type="checkbox"/> Sex workers | <input type="checkbox"/> People in contact with the justice system |
| <input type="checkbox"/> Victims of modern slavery | |

Please specify any additional options here...

4d. If answered "Yes" to [4a] then:

Please provide any further details

CAUSE FOR CONCERN

Occasionally NCEPOD will refer cases that have been identified as 'LESS THAN SATISFACTORY' when it is felt that further feedback to the Trust/ Health Board concerned is warranted. This is usually due to an area of concern to the hospital or clinician involved, and not for issues highlighted across the body of case notes. This process has been agreed by the NCEPOD Steering Group and the GMC. The medical director of the Trust/ Health Board is written to by the Chief Executive of NCEPOD explaining our concerns. This process has been in operation for 10 years and the responses received have always been positive in that they feel we are dealing with the concerns in the most appropriate manner.

5. If answered "Less than satisfactory" to [1a] then:

Do you feel that this case should be considered for such action?

- Yes No