

# SurgWeek-2

The World's Largest Study on Post Operative Complications



Register your interest now!



## National Leads Information Pack

### Key responsibilities

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The national lead is responsible for coordinating the study within their country.

### Before study launch

#### 1. Disseminate the project

We ask you to advertise and disseminate the study via your national networks (e.g. surgical societies and associations, lectures, conferences). We have created a flyer and a slide deck to help disseminate this study, which can be found [here](#).

We encourage you to share or comment on our social media pages such as LinkedIn and publicise across any further forums as you deem fit.

#### 2. Recruit study sites

Please encourage registration of study sites for all roles via the Expression of Interest (EoI) form on [REDCap](#). The different roles will be assigned at a later stage.

#### 3. Apply for national ethics approval (if applicable)

Please assess whether national ethics approval is required and/or recommended for this study in your country. Should this be needed, please ensure that approval is obtained before data collection.

Once ethics approval is obtained, please communicate this information to Hospital Leads as they will be asked to upload this as part of their site survey. We also ask you to send us proof of approval to [surgweek@contacts.bham.ac.uk](mailto:surgweek@contacts.bham.ac.uk).

#### 4. Ensure you have access to REDCap

To log on to REDCap for this study, you must use your unique username ending in '.sw2'. This has been emailed to you by the study team from a no-reply email starting in 'globalsurgenquiry'. If you can't find your username, please contact the study team at [surgweek@contacts.bham.ac.uk](mailto:surgweek@contacts.bham.ac.uk).

#### 5. Select Hospital Leads

It is your role as National Lead to select the Hospital Leads who will be responsible for the day-to-day running of the study at each study site.

People interested in participating in local data collection will complete an Expression of Interest (EoI) form on [REDCap](#). Out of these, some will express their interest in becoming Hospital Lead. It will be your responsibility to choose one of these collaborators to become the Hospital Lead for their site. Please note that the primary Hospital Lead must be senior surgeons or anaesthetists (consultant / attending or equivalent).

Please refer to the following short video for instructions on the Hospital Leads selection process on RedCap: <https://www.youtube.com/watch?v=TNdAhrVeqo&t=1s>.

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Once selected, Hospital Leads will receive a list of everyone in their study site who expressed their interest in participating via the EoI form on REDCap. They will be responsible for selecting their Hospital Co-Leads, organising collaborators into mini-teams for data collection, securing appropriate regulatory approvals in their hospital, and completing the site survey.

## 6. Translation

National leads will facilitate translation of the protocol, CRFs, and other study materials into local language(s), if needed.

## During study

As National Lead, you are the primary point of contact for SurgWeek-2 in your country. Whilst the study is running, please make sure you maintain effective and responsive communication with the study team, Hospital Leads and Co-Leads, and local collaborators.

## After study

### 1. Disseminate publications

Please disseminate any publications that result from this study. Dissemination materials will be provided on the SurgWeek-2 website once available.

### 2. Report to national ethics committee (if applicable)

If you requested national ethics approval, please ensure that you provide them with any necessary reports or publications.

## Authorship

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All National Leads, Hospital Leads and Co-Leads, and mini-team collaborators who contribute to data collection will be included as PubMed-citable co-authors on all resulting publications, according to their roles.

## Study overview

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Please see the protocol summary below. The full study protocol can be found [here](#).

**Background:** Surgery is a core component of healthcare, fundamental to delivery of maternity, trauma, and cancer care. Around 313 million people undergo surgery each year. However, postoperative complications place a heavy burden on patients, communities, and health systems; an estimated 50 million adults experience postoperative complications each year. Complications can prolong hospital admissions, increase healthcare costs, result in disability, and lead to 3.5 postoperative million deaths each year. Despite the importance of postoperative complications, there is limited high-quality postoperative outcome data in many settings.

**Aim:** The aim of this international, prospective, multicentre cohort study is to assess global burden and variation of postoperative complications.

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**Logistics:** This investigator-led study will include consecutive patients undergoing surgery across six, 7-day data collection blocks between 31 August 2026 and 11 October 2026. Any hospital that delivers surgery is eligible to participate. Mini-teams of up to three collaborators will collect data for one or multiple specialities, and one or multiple 7-day data collection blocks. To maximise the number of specialties and/or 7-day data collection blocks covered, hospitals can set-up multiple mini-teams. Hospital Leads will coordinate mini-teams at their hospital and ensure that all necessary study approvals are in place before data collection starts.

**Methodology:** All adult and paediatric patients undergoing elective or emergency surgery will be included. 30-day follow-up data will be collected from routine hospital records. The primary outcome will be overall 30-day postoperative complications. There will be no changes to routine patient care. The primary outcome will be 30-day postoperative complications.

**Discussion:** This study will provide robust, contemporary global data on the burden and variation of 30-day postoperative complications across diverse healthcare settings. The findings will inform benchmarking, guide quality improvement initiatives, and support strategies to reduce postoperative morbidity and mortality worldwide.

## Data collection periods

Block	Inclusion starts	Inclusion ends	30-day follow-up ends
Block 1	00:00 31 August 2026	23:59 6 September 2026	6 October 2026
Block 2	00:00 7 September 2026	23:59 13 September 2026	13 October 2026
Block 3	00:00 14 September 2026	23:59 20 September 2026	20 October 2026
Block 4	00:00 21 September 2026	23:59 27 September 2026	27 October 2026
Block 5	00:00 28 September 2026	23:59 4 October 2026	3 November 2026
Block 6	00:00 5 October 2026	23:59 11 October 2026	10 November 2026

## Key contacts and links

You can find all the information about the study on the [SurgWeek-2 website](#).

If you have any queries, you can contact us at [surgweek@contacts.bham.ac.uk](mailto:surgweek@contacts.bham.ac.uk). We aim to respond within 2 to 3 working days.