
OR.3.2 Nursing staff competencies are assessed by using different methods (e.g. written test, return demonstration).

Standard Intent:

Nursing staff working in the operating room should be competent and skillful to carry out all nursing care activities carried out inside the operating room. The measurement of their competency should be implemented through a comprehensive program that is based on written examination to ensure that the staff has the knowledge, also, there should be training on the skills and return demonstration by nurse manager to be sure that all the staff are meeting the requirements of operating theatre nurse. Substandard OR.3.1.1 through OR.3.1.12 highlights the minimum required competencies.

OR.4 Patients who are admitted for surgery have medical assessment performed and plan of care documented prior to surgery.

OR.4.1 Prior to surgery, the most responsible physician performs medical assessment and ensures documentation of the following:

- OR.4.1.1 History and physical examination.
- OR.4.1.2 Pre-operative diagnosis.
- OR.4.1.3 Diagnostic tests (laboratory, radiology, etc.) as ordered.
- OR.4.1.4 Signed informed consent.
- OR.4.1.5 Planned procedure.

OR.4.2 In emergency situations where a complete medical assessment cannot be documented, a brief note is written by the most responsible physician.

Standard Intent:

The most responsible physician must perform medical assessment and document in the patient medical record. The assessment should include history and physical examination, preoperative diagnosis, diagnostic tests (laboratory, radiology, etc.) as ordered, signed informed consent and planned procedure. In a case of an emergency situation where a complete medical assessment cannot be documented, a brief note is written by the most responsible physician.

OR.5 Policies and procedures guide the care of patients in the operating room.

OR.5.1 Policies and procedures guide the care of patients in the operating room. This includes, but is not limited to, the following:

- OR.5.1.1 Handover process between unit nurse and operating room nurse and operating room reception.
- OR.5.1.2 Prevention of wrong patient, wrong surgery/procedure, or wrong site.
- OR.5.1.3 Infection control measures in operating room and recovery room including isolation precautions.
- OR.5.1.4 Handling patients with infectious diseases (e.g. Tuberculosis, AIDS, and Hepatitis).



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OR.5.1.5 Equipment daily checks and periodic maintenance.

OR.5.1.6 Environmental controls in operating room and recovery room.

OR.5.1.7 Safe labeling, handling, storage and transportation of laboratory specimens in operating and recovery rooms.

OR.5.1.8 Safe handling, storage and transportation of commonly used chemicals in operating and recovery rooms.

OR.5.1.9 Safe handling, transportation and storage of blood in operating and recovery rooms.

OR.5.2 Policies are collaboratively developed with operating room nurses, anesthesia staff, surgeons, and laboratory staff as per level of involvement.

Standard Intent:

Availability of multidisciplinary policies and procedures to guide the care in operating room. Policies must outline all aspects of safe care to patients such as observing the implementation of the international patient safety goals, infection control measures, equipment daily checks, handling laboratory specimens, chemical and blood (as in substandard OR.5.1.1 through 5.1.9)

OR.6 There is a policy for patient acceptance into the operating room.

OR.6.1 There is a policy for accepting patients in the operating room that mandates the following:

OR.6.1.1 Patient identification by name and medical record number as listed on the patient's ID band.

OR.6.1.2 The consent form is checked for completion.

OR.6.1.3 The operation/ procedure and the surgeon's name are checked.

OR.6.1.4 The site of surgery and its preparation and whether it is marked or not are checked.

OR.6.1.5 The laboratory and radiology results and pregnancy test as appropriate are checked.

OR.6.1.6 The pre-anesthesia sheet is checked for completion.

OR.6.1.7 The history and physical examination are checked for documentation.

OR.6.1.8 The requisition for blood is verified to ensure blood is reserved in the blood bank, if needed.

OR.6.2 The policy is collaboratively developed by the head of surgery, head of anesthesia, and the nurse manager.

Standard Intent:

Accepting patient in OR is vital aspect of patient care because it ensures that the nurse is receiving right patient for right procedure and all patient information and operation requirement are completed prior sending patient to the operative room. Hospital should