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).

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.

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.

OR.7   The hospital has a process to prevent inadvertent retention of instruments or sponges in surgical wounds.

OR.7.1   The hospital develops and implements a policy and procedure to prevent inadvertent retention of instruments or sponges in surgical wounds.

OR.7.2   The count process includes instruments, sharps, sponges, and others as applicable.

OR.7.3   The policy addresses procedures that are exempted from the counting process (e.g., cataract, cystoscopy).

OR.7.4   The count process is standardized.

OR.7.5   The policy addresses the procedure to follow in case of a count discrepancy.

OR.7.6   The count process is documented in the count sheet.

OR.8   The hospital develops and implements a policy for day surgery cases.

OR.8.1   The policy defines the types of surgical procedures that are performed as "day surgery".

OR.8.2   The policy addresses the categories of patients who are not candidates for day surgery.

STANDARDS
Operating Room (OR)