OR.8.3 The policy defines a process for patients who have to be admitted to the hospital from the day surgery unit.

OR.8.4 The most responsible physician writes a discharge order.

OR.8.5 Patients are discharged in the company of a responsible adult who assumes responsibility and is capable of taking care of the patient.

OR.8.6 Patient/family education and follow-up care instructions are provided prior to discharge.

OR.9 An operative report is documented immediately after the surgery/procedure.

OR.9.1 There is always an operative report that includes:

- OR.9.1.1 Pre and post-operative diagnosis.
- OR.9.1.2 The name of the surgeon and assistants.
- OR.9.1.3 The operation/procedure performed.
- OR.9.1.4 Description of the surgery/procedure and findings.
- OR.9.1.5 Presence or absence of intra-operative complications.
- OR.9.1.6 Surgical specimens removed and sent to histopathology.
- OR.9.1.7 Amount of blood loss.

OR.9.2 The operative report is documented before the patient leaves the recovery room to support the continuity of patient care.

OR.9.3 The operative report is signed/authenticated by the surgeon performing the procedure.

OR.10 Tissues removed during surgery are sent for pathologic examination.

OR.10.1 Tissues or specimens removed during surgery have pathological examination unless exempted by a hospital policy.

OR.10.2 Surgical specimens are accurately identified.

OR.10.3 The report of the examination is signed by the pathologist and made part of the medical record.

OR.11 Each patient has a post-operative plan of care.

OR.11.1 A post-operative plan of care is written by the responsible surgeon.

OR.11.2 The post-operative plan of care includes:

- OR.11.2.1 Post-operative monitoring parameters and its frequency.
- OR.11.2.2 Wound care.
- OR.11.2.3 Care of drains and catheters.
- OR.11.2.4 Special patient positioning requirements.
- OR.11.2.5 Nutritional instructions.
- OR.11.2.6 When to start mobilization.
- OR.11.2.7 Special referrals (e.g. physical therapy, respiratory therapy)
- OR.11.2.8 A new order for all required medications.
- OR.11.2.9 Any other post-operative care needed including required follow up.

OR.11.3 The post-operative plan of care is available in the patient's medical record before discharge from recovery.

OR.11.4 Each patient is assessed after surgery and reassessed at intervals appropriate to the patient's condition.

OR.11.5 Medical, nursing, and other care plans are documented in the patient's medical record.