

Passing Surgical Instruments

(0:17 - 0:41)

Hello everybody, Mike here from SurgTech Academy and today I'm going to demonstrate basic instrument passing with and without hand signals. At this point we have already ready to go, the patient is prepped and draped, cords are thrown off and the surgeon is ready to start. Now the first thing you want to remember is that you want to make sure the Mayo stand is at an acceptable level ergonomically and is still sterile.

(0:42 - 1:06)

We can't have the Mayo stand above chest level or below waist level as those areas are contaminated. So you may need your circulator to get you a step stool to go higher or you may need anaesthesia to raise the OR bed just to make sure that we're sterile and the Mayo stand is comfortable and doesn't cause back pain. Before we get started, I want to spend a second teaching my surgeons everything they need to know when participating in this exercise.

(1:07 - 1:25)

As the surgeon, your main jobs are to verbally ask for instruments and to use hand signals to ask for instruments. And those three main hand signals are scissors, tissue forceps, and stitch. So scissors, tissue forceps, and stitch.

(1:25 - 1:38)

And there actually could be a fourth visual which is, please just give me what I need. But that might take a while for you to get that one. And there's also two main hand positions that surgeons receive the instrument.

(1:39 - 1:53)

The first way is the easiest where you just stand there with your hand extended at waist level like you're going to shake somebody's hand. Most instruments are received using this method. The second way is to shape your hand like you're putting a book on the shelf.

(1:53 - 2:14)

We use this hand shape for the scalpel and the tissue forceps. Now when teaching instrument passing, I tell my students to follow four main rules. And those rules are to pass firmly, and then middle finger on the box lock, pass the instrument straight up and down, or pass it in position to use.

(2:15 - 2:25)

So for most of our basic instruments, it looks like this. So I'm going to start with the scissors.

Straight up and down, my middle finger's on the box lock, and I'm going to press firmly.

(2:26 - 2:32)

Surgeon's hand is like they're shaking your hand. Just like that. All right.

(2:32 - 2:35)

Coker. Middle finger on the box lock. Straight up and down.

(2:35 - 2:43)

Pass firmly. You hear that cool little click? Alice forceps. Middle finger on the box lock.

(2:43 - 2:50)

Pass firmly. Kelly. Guess what? Middle finger on the box lock.

(2:50 - 2:53)

Straight up and down. Pass firmly. All right.

(2:54 - 2:58)

Even a Babcock. Middle finger on the box lock. Pass firmly.

(2:59 - 3:17)

Now, it's important to try and stay away from the tips of the instruments, as it is the sharpest and you could cut your glove. Also remember that curved instruments are passed with the tips curving toward the midline of the surgeon. And press firmly so that the surgeon's grasp reflex is initiated.

(3:17 - 3:31)

You saw that a couple of times as I was passing instruments, that my grasp reflex automatically tried to grasp the instrument. All right. Now, like everything else in surgery, there are exceptions to the rule.

(3:31 - 3:48)

There are a couple of instruments on my Mayo stand that are unique. Now the first one I want to talk about is the scalpel. Now the first thing I still tell my students is to avoid the tip, as this will inevitably cut your finger and I will have to send you to the emergency room for stitches.

(3:48 - 4:04)

So I have them grab the top of the scalpel and instead of it placing firmly in the surgeon's palm,

we're going to place it in the webbing between the thumb and the index finger. It places just like this. All right.

(4:04 - 4:15)

I'll show you that again. Sharp needle down, ring finger right in the middle, placing it in the webbing. Now the second unique instruments are tissue forceps.

(4:15 - 4:34)

Now these are very similar to the scalpel. I tend to grab the instrument, mid instrument, and place it back in the surgeon's webbing between the thumb and the index finger, just like this. All right, again, thumb, middle finger, passing it right into the webbing.

(4:36 - 4:51)

And then the last instrument I want to pass is the needle holder. It is very similar to most of the basic instruments, except that we have a needle direction to think about. I tell my students to make sure that the needle tip is point toward the midline and at the surgeon's heart.

(4:52 - 5:13)

So even still, my finger is at the box lock, I'm going to point it, I'm going to pretend, point it towards the surgeon, me, nice and firm. And it's still, they have that grasp reflex. Now if you want to tell them, you don't have to tell them to point it at the surgeon's heart.

(5:13 - 5:23)

You can pick any anatomy you want to, but that visual seems to work for my students. And well, that's it. Passing of the basic instruments with and without hand signals.

(5:23 - 5:32)

This is Mike from SurgTech Academy, wishing you a great day in surgery and reminding you to be a superstar in your OR.