

SURGICAL SERVICES DEPARTMENT

The Surgical Services Department must deal with a variety of situations that are unique to the performance of operative and other invasive procedures. Review the topics below, discussing with your Surgical Services staff how your department manages each issue. Write your conclusions in summary format for review by all department members – to prepare your department for surveyor inquiry on these subjects:

- Flash sterilization – when and how often performed:

- Equipment procurement, maintenance and biomedical certification:

- Equipment representatives and other “visitors” in the OR:

- Education and training on new equipment:

- On-call OR coverage (response time for emergency procedures):

SURGICAL SERVICES DEPARTMENT PHYSICAL INSPECTION

During the JCAHO surveyor's visit to the Surgical Services Department, he/she will tour and physically inspect the department. To properly prepare for your survey, it is recommended that you and your staff perform your own departmental inspection of the following areas:

- Sterile area demarcation line is clearly visible
- Assessment of the crash cart(s)
 - ✓ Crash cart check - per your policy, has the check sheet been completed and initialed
 - ✓ Does the check include integrity of the lock and documentation of lock number
 - ✓ Does the check include charging defibrillator to specified jules, both on and off battery pack, per manufacturer's recommendations
 - ✓ Assure all medications and sterile supplies do not exceed expiration dates
 - ✓ Assure that all necessary equipment is available (pediatric scope & paddles, oxygen tank is full, suction machine available, etc.)
- The medication refrigerator is clean and:
 - ✓ Is refrigerated at the appropriate temperature
 - ✓ Contains a daily temperature assessment log
 - ✓ Contains only medications, (i.e., no patient or staff food)
- Medication supplies are locked, secured from patient or visitor access
- Expiration dates on all medications and supplies are not exceeded, this includes medications kept in the medication refrigerator (note: special emphasis on appropriate dating of medication vials – pursuant to hospital policy and procedure)
- Narcotics control sheet is complete and accurate for usage and wastage
- Anesthesia carts do not contain unlabeled or expired medications
- Sharps disposal containers are filled with sharps only (no paper, empty plastic vials, etc.) and are **not** overfilled

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FOCUS ISSUES

Discuss with your staff how your Surgical Services Department would handle the following situations. Document your collective conclusions below:

- Management of patients with severe adverse drug reactions:

- Are tests performed by Surgical Services Department staff that fall under the “waived” or “point of care” testing guidelines, (i.e., blood glucose via finger stick)? If so, has there been evidence of staff competency to perform these tests? Has there been an approved definition on what type of care will be based on the results of these tests? If specific equipment is used, such as a glucometer, are calibration checks routinely performed per policy and procedure?

- Because conscious sedation is used in the Surgical Services Department, can you demonstrate to the surveyor that the staff is competent to administer and monitor conscious sedation? (i.e., all staff must meet the same competency requirements when the same service is provided, regardless of location throughout the facility)

- Do members of the Surgical Services nursing staff mix or prepare IV solutions? If so, what type of education, training and competency evaluation has each member received?
