Effective Date: 4/8/16

Category: Clinical
Title: Environmental Safety, Surgical Services
Applies to:
St. Peter's Health Partners (SPHP)
All SPHP Component Corporations
□ The following SPHP Component Corporations: (List components as needed)
X Albany Memorial Hospital – Surgical Services
St. Peter's Health Partners Medical Associates (SPHPMA)
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PURPOSE

To provide and maintain a safe environment for patients undergoing diagnostic, therapeutic, invasive, or operative procedures. To provide safety steps for department employees to decrease chance of patient and employee injuries.

POLICY STATEMENTS

All Surgical Services Department personnel will be familiar with the Safety Committee's Program (for details see Safety Committee Manual) and participate in all safety drills provided by the Safety Committee as specified by the Life Safety Code, state, county, and city safety standards.

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PROCEDURE

Technical and aseptic practice guidelines are established, maintained and periodically reviewed and revised in accordance with AORN and ASPAN recommended practices of technical and aseptic practice for the Operating Room and PACU.

ELECTRICAL HAZARDS:

- 1. All equipment recognized as potential electrical hazard is to be withdrawn from use immediately and forwarded to the Biomedical Department.
- 2. Any equipment which does not have a grounded electrical plug (three-pronged) or which is past the due date for electrical inspection, is to be removed from service and made available to the Biomedical Department.
- 3. The Surgical Services Department will make available to the Biomedical Department all electrical equipment for routine biomedical inspections requested. Master records of the inspections will be maintained in the Biomedical Department.
- 4. All equipment, new, purchased, rented, and/or leased for evaluation, will be checked for electrical safety by the Biomedical Department prior to being placed into use. This includes all electrical items owned by staff members (i.e. radios, hair dryers, shavers, toaster ovens, etc.).
- 5. Defibrillators should be used only when staff members are standing on a dry floor and no part of their body is in contact with the patient's bed or the patient receiving cardioversion.
- 6. To reduce possible shock, use all electrical equipment as per manufacturer's instructions and always with dry hands.
- 7. Uninsulated invasive catheters are not allowed.

EQUIPMENT HAZARDS:

- 1. No modification of equipment is authorized except as specified in the manufacturer's recommendations and will be done only with the explicit approval of the Department of Engineering.
- 2. No equipment will be placed into use until written verification of proper operation as per manufacturer's standards have been made by the Biomedical Department. Equipment which has been subjected to temporary repair (taping or wiring) will NOT be placed into use.

PHYSICAL FACILITIES:

Physical facilities are maintained by:

- 1. Temperature control within the acceptable ranges of 65° to 72° (20° C to 24° C)
- 2. Humidity control with the acceptable ranges of 30% to 60%
- 3. Adequate air circulation and air filtration system proper maintenance of air filtering system (minimum of 15/hour)
- 4. Fire alert systems
- 5. Constantly monitored gas systems and vacuum systems
- 6. Automatic auxiliary power system
- 7. Electrical safety monitors
- 8. Regularly scheduled cleaning of air vents

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9. Guidelines and Regulations used in determining and monitoring the Surgical Services Safety are not limited to the following

- a. Governing Boards
- b. Licensing agencies
- c. National Fire Protection Association
- d. Occupational Safety and Health Administration
- e. Department of Health and Human Services
- f. Environmental Protection Agency
- g. Manufacturers' equipment manuals
- h. AORN and ASPAN Recommended Standards

GENERAL SAFETY:

- 1. Apply good body mechanics at all times. Surgical Department personnel will be monitored on an ongoing basis.
- 2. Never disconnect or connect electrical equipment with wet or moist hands.
- 3. Discard all needles, razors, scalpel blades, and broken glass only into specified containers.
- 4. Stretcher side rails will be kept in the "up" position.
- 5. OR Table safety belts will be used for all patients.
- 6. Registered Nurses may apply safety restraints without a direct order from the Surgeon to prevent patient and employee injury.
- 7. Correct patient and employee body alignment will be observed and maintained at all times.

DEPARTMENT/UNIT DOCUMENTATION:

- 1. Documentation of participation by unit/department personnel in all aspects of safety (i.e. drills, in-services, etc.) may be found in the Unit Department's Education files.
- 2. Master records of the inspections will be maintained in the Biomedical Department.

REFERENCES

AORN, Inc. 2014, AORN Standards & Recommended Practices for Peri-operative Nursing.

Berry and Kohn's Operating Room Technique, 12th Ed. Fortunato, N. 2012

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