

Brown, Stacey

From: Muck, Charles A.,
Sent: Thursday, August 23, 2012 9:52 AM
To: Fritz, Karen
Subject: FW: New Polices
Attachments: 3364-124-75 Room Break Down.pdf; 3364-124-74 Hand Off.pdf; hand off checklist.docx; KIDNEY container Pictures.docx

Please REad

From: Hall, Edwin J
Sent: Monday, August 20, 2012 3:46 PM
To: Muck, Charles A.,; Neese, Thomas
Cc: Casabianca, Andrew; Rees, Michael; Selman, Steven
Subject: New Polices

Please forward to all staff with the following message.

As a requirement for the continued success of the kidney transplant program and to improve safety in the Operating Room we have adopted 2 new policies effective immediately. These policies deal with staff breaks and operating room break down at the end of the case.


Also attached is a checklist to be used by circulators at break time and attached to the resource map paperwork at the end of the case.

There are also pictures of a new container to be used for transplant cases and a donor kidney identifier sign to be placed on the slush machine when the kidney is located in the slush machine.

You are required to review and let management know if there are aspects of the new policy that need clarification. You will also be required to sign an acknowledgement that you have reviewed the policies and pictures. This acknowledgement is required as a condition for our program.

Thanks for your cooperation.

Ed

Name of Policy:	Intra Operative Hand Off Communication	 THE UNIVERSITY OF TOLEDO <small>(1872)</small>
Policy Number:	3364-124-74	
Department:	Nursing Service-	
Approving Officer:	Director of Nursing/CNO	
Responsible Agent:	Administrator, Operative Services	
Scope:	The University of Toledo Medical Center	Effective Date: 08/16/2012 Initial Effective Date: 08/16/2012
<input checked="" type="checkbox"/> New policy proposal		<input type="checkbox"/> Minor/technical revision of existing policy
<input type="checkbox"/> Major revision of existing policy		<input type="checkbox"/> Reaffirmation of existing policy

(A) Policy Statement

Operating room nursing personnel will always participate in a structured, consistent sharing of information whenever there is a hand off of care from one nurse to another. The process will be geared to the unique needs of the surgical patient and include up to date information regarding the patient's care, treatment, condition and any recent or anticipated changes. Staff breaks and relief which are planned during a procedure will occur only after consultation with the attending surgeon regarding the appropriateness of timing of the break. It is the responsibility of the staff member being relieved to consult with the surgeon. If the surgeon feels the timing is not appropriate the break will not occur and the change in plan communicated to the charge nurse.

(B) Purpose of Policy

To provide a method of structured, consistent sharing of information whenever there is a hand off of care from one nurse to another.

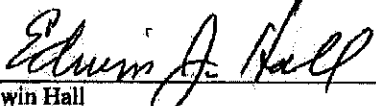

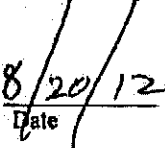
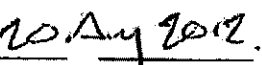
(C) Procedure

1. The nurse who is being relieved will be responsible for initiating the process.
2. The process will occur as soon as the relief nurse enters the room unless patient care needs require immediate attention.
3. The process must be completed before the nurse who is being relieved leaves the room.
4. The content of the information to be covered in the hand off are listed below and on the "Surgical Services Intraoperative Hand Off Checklist (attached).

- Patient name
- Procedure
- Allergies
- Blood band and status of blood products (if any)
- Medications on field and available in room
- Procedural status
- Special equipment on field and available in room
- Implants used/available in room
- People to contact (i.e. patient family, frozen section, etc.)
- *Kidney transplants only: location of donor kidney
- Other pertinent information:

5. Both the incoming and departing nurse will sign the form to confirm that the communication has taken place.

6. In instances where there are 2 or more nurses in attendance the hand off communication process will be followed whenever additional nursing personnel enter the room to participate in the case.
7. The checklist will be included in other case summary information and dropped off at the operating room front desk at the conclusion of every case.

<p>Approved by:</p> <p> Edwin Hall Administrator, surgical Services</p> <p> Daniel Barber, RN, BSN, MBA Director of Nursing/CNO</p> <p><i>Created By: Edwin Hall</i></p>	<p>Review/Revision Date:</p> <p> Date</p> <p> Date</p>
<p>Next Review Date: 8/16/15</p>	
<p>Policies Superseded by This Policy:</p>	

It is the responsibility of the reader to verify with the responsible agent that this is the most current version of the policy.