(A) Policy Statement

Rigid criteria for sanitation will be followed in the Operating Room (O.R.) following each and every surgical procedure. Standard precautions will be followed at all times per Policy No. 3364-109-ISO-401.

(B) Purpose of Policy

To contain and confine potentially harmful organisms on all surgical procedures, prevent cross contamination within the operating room suite, and to provide protection for all personnel.

(C) Procedure

1. Damp dusting, using a hospital-approved detergent/disinfectant and a clean cloth/wipes, will be done daily by 11:00pm - 7:00am personnel between 5:00 a.m. and 6:00 a.m. All unnecessary tables and equipment will be removed from the room.

2. Areas contaminated by organic debris (i.e. blood, sputum) during the operative procedure are to be immediately cleaned up by the circulating nurse using a hospital approved detergent/disinfectant and a clean cloth/wipes.

3. Infectious waste (i.e. soiled lars and sponges) must be contained in red garbage bags for disposal at the end of the case. All trash will be sent to Sterile Processing Department (SPD) for disposal. Trash generated in the Isaac Surgery Center will be placed in the soiled utility room to be picked up by Environmental Services.

4. Strict adherence to hand washing will be carried out before and after each patient contact, and after environmental cleaning.

5. Once the procedure has started, all instruments, linen, basins, etc. will be kept in the room until completion of the surgery. At the completion of the case linen will be disposed of in appropriate receptacle. Instruments will be contained in the case cart and transported to SPD for processing. Instruments on an open case cart, leaving the George Isaac Surgery Center, will be covered by a red biohazard bag and transported to SPD.

6. Prior to leaving the OR, all gowns and gloves are to be removed inside out and placed in the appropriate receptacle for disposal.

7. All cases will be considered contaminated thus all linen from opened packs, used and unused, will be handled by the same method:
   a. Place all linen in water resistant hamper bags - no more than 2/3 full.
   b. Place hamper bags in case cart for transport to SPD at end of the case. Linen hamper bags generated in the George Isaac Surgery Center will be placed in the soiled utility room to be collected by linen Service.
8. All instruments are to be opened and placed in perforated washer trays by the gloved scrub person and then placed in the case cart to be sent to SPD for reprocessing or the OR soiled utility room for processing in the OR.

9. Solutions are to be contained in the suction system. Suction canisters are to be capped tightly in the case cart for later disposal. Empty metal basins are placed in the case cart for reprocessing.

10. At the completion of the surgical procedure dirty case carts are to be taken to the soiled utility room for processing as follows:
   a. Suction canisters and fluid filled containers are emptied into a flush type hopper and then discarded into infectious waste bags.
   b. Red infectious waste trash bags are tied securely then placed in red plastic trash bins with lids. Non-infectious trash in clear plastic bags is placed in white trash bins.

11. When full, or at the end of the day, Neptune waste management system, is placed in the docking station for emptying and cleaning

12. Between cases, horizontal surfaces of furniture and equipment that have been involved in the procedure are cleaned using a hospital approved detergent/disinfectant and a clean cloth/wipe. Spot cleaning of walls is to be done at time of contamination.

13. If OR floors are contaminated with visible liquid or body fluids they will be mopped using a hospital-approved detergent/disinfectant and a clean mop head. After use, mop heads are to be discarded with the linen.

14. Environmental Services personnel do terminal cleaning at the completion of the day's schedule.
   a. All furniture is to be thoroughly scrubbed using a hospital approved detergent/disinfectant and good mechanical friction.
   b. Wheels and casters are to be cleaned and kept free of debris.
   c. Spotlights and tracks are to be cleaned.
   d. The floors are to be mopped using approved mopping procedure.
   e. Cabinet and OR doors are to be cleaned using a hospital approved detergent/disinfectant paying special attention to handles and push plates.
   f. Scrub sinks are to be thoroughly cleaned daily.
   g. Cleaning equipment is to be thoroughly cleaned and dried before storage.
   h. A record of cleaning will be kept by Environmental Services.

15. At least weekly, all air conditioning grills are to be vacuumed. Cabinet shelves are to be wiped with a hospital approved detergent/disinfectant and autoclave interiors cleaned according to the recommendations by the manufacturer.

---

Approved by:

[Signature]
Christina Powlesland, BSN, RN
Nurse Manager Operating Room

[Signature]
Monecca Smith, MSN, RN
Chief Nursing Officer/CNO

Date: 4/26/16

Review/Revision Date:
1982 7/02
1983 8/05
1984 7/29/2008
1985 10/28/2011
1986 9/28/12
1988
1989
8/90
3/93
6/95
1/99

Next Review Date: 4/2019