


Name of Policy: Intra Operative Hand-Off Communication Policy Number: 3364-124-74 Department: Nursing Service/Operating Room Approving Officer: Director Surgical Services Responsible Agent: Chief Nursing Officer Scope: The University of Toledo Medical Center (UTMC)	 Effective Date: 12/1/2022 Initial Effective Date: 8/16/2012				
<table> <tr> <td><input type="checkbox"/> New policy proposal</td> <td><input checked="" type="checkbox"/> Minor/technical revision of existing policy</td> </tr> <tr> <td><input type="checkbox"/> Major revision of existing policy</td> <td><input type="checkbox"/> Reaffirmation of existing policy</td> </tr> </table>		<input type="checkbox"/> New policy proposal	<input checked="" type="checkbox"/> Minor/technical revision of existing policy	<input type="checkbox"/> Major revision of existing policy	<input type="checkbox"/> Reaffirmation of existing policy
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(A) Policy Statement

Operating Room (OR) personnel will always participate in a structured method of information sharing whenever there is a change in personnel delivering care to the patient.

(B) Purpose of Policy

To provide a standardized method for sharing patient information whenever care is transferred from one healthcare professional to another.

(C) Procedure

RN Circulator

1. The Hand-off communication 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.
2. Staff breaks and relief, which are planned during a procedure, will occur after consultation with the attending surgeon regarding the appropriateness of the timing of the break. It is the responsibility of the staff member being relieved to consult with the surgeon. If there are pending items going onto or coming off the sterile field, personnel will wait until these items are resolved before making the staff changes. If the surgeon feels the timing is not appropriate, the break will not occur, and an alternative plan will be communicated to the OR Operations Supervisor or designee.
3. Hand-off communication will occur whenever the assigned Registered Nurse (RN) circulator is being relieved of duties and whenever another nurse enters the room to provide assistance, using the following guidelines.
 - a) the RN circulator being relieved is responsible for initiating the process;
 - b) handoff will occur as soon as the relief RN circulator enters the room, unless patient care needs require immediate attention;
 - c) handoff must be completed before the RN circulator, who is being relieved, leaves the room.
 - d) RN circulators will document hand-off communication in electronic medical record (EMR).

- e) content of the information to be covered in the hand-off is defined below:

- 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
- Type and Location of tissues/specimens
- Any pending items going onto or coming off the sterile field
- Other pertinent information

Scrub Person

1. The hand off communication transfer of care will be geared to the unique needs of the surgical patient and include up to date information regarding the patient's treatment and any recent or anticipated changes.
2. Staff breaks and relief will occur after consultation with the attending surgeon regarding the appropriateness of the timing of the break or relief. If there are pending items going onto or coming off the sterile field, personnel will wait until these items are resolved before making the staff changes. If the surgeon feels the timing is not appropriate the break will not occur, and an alternative plan will be communicated to the Operations Supervisor or designee.
3. Hand off communication will occur whenever the assigned scrub person is being relieved of their duties, using the following guidelines;
 - a) the scrub person being relieved is responsible for initiating the handoff;
 - b) the handoff will occur as soon as the relief scrub person scrubs in, unless patient care needs require immediate attention;
 - c) all necessary sharps and sponge counts will be performed with the RN circulator unless unable to perform due to procedure status;
 - d) any sutures/ties/specialty items being used will be addressed. Information about opened instruments, what is being used primarily and what is available, or any anticipated supplies in the room, will be communicated between scrub persons;
 - e) the local anesthetics and medication solutions on the field will be specified;
 - f) specimens on the sterile field will be accounted for;
 - g) a brief description of the procedure, along with anticipated future events and allergy history, will be communicated between scrub persons.

<p>Approved by:</p> <p>/s/ _____ Date _____ Michelle Mallette, MSN, RN, CNOR Director Surgical Services</p> <p>/s/ _____ Date _____ Kurt Kless, MSN, MBA, RN, NE-BC Chief Nursing Officer</p> <p>Review: Policy & Standard Committee, 5/16, 8/19, 12/22 Revision completed by: Ronni Zona, RN, BSN, CNOR Perioperative Nurse Educator</p>	<p>Review/Revision Date:</p> <p>8/16/12 9/25/12 1.27.14 1.1.2017 8/1/2019 12/1/2022</p> <p>Next Review Date: 12/2025</p>
<p>Policies Superseded by This Policy: Supersedes policy of same name and number that went into effect 8/16/12</p>	