

Name of Policy: Operating Room Infection Control Policy Number: 3364-124-12 Approving Officer: Chief Executive Officer Responsible Agent: Chief Nursing Officer Scope: The University of Toledo Medical Center Operating Room (OR)/Perioperative Services		 Effective date: 12/2025 Original effective date: April 1, 1981	
Key words: Operating Room, Infection Control, Standard Precautions, Safety, Surgical Procedures			
	New policy proposal		Minor/technical revision of existing policy
	Major revision of existing policy	X	Reaffirmation of existing policy

(A) Policy statement

Criteria for infection control will be followed in the operating room. Standard precautions will be always followed per policy 3364-109-ISO-404.

(B) Purpose of policy

To provide every patient undergoing surgical intervention the same degree of safety and precaution.

To contain and confine potentially harmful organisms on all surgical procedures.

To prevent cross-contamination within the operating room.

To provide protection for all personnel.

(C) Classification of tasks

Categorization of risk classification for all routine and reasonably anticipated job-related tasks.

- (1) Category I - Tasks that involve exposure to blood, body fluids, or tissues. OR personnel performing these tasks are:
 - (a) Staff nurses and surgical technologists

- (i) Handling surgical implements
 - (ii) Handling specimens
 - (b) Perioperative Technicians
 - (i) Disposal of post-op wastes (liquids, solids, sharps, etc.)
 - (ii) Transport of specimens, blood, and blood products
 - (iii) Cleaning of OR equipment
 - (2) Category II - Tasks that involve no exposure to blood, body fluid, or tissues, but may require performing unplanned category I tasks. OR personnel performing these tasks are unit secretaries for transport of specimens, blood, or blood products.
 - (3) Category III - Tasks that involve no exposure to blood, body fluids, or tissues, and Category I tasks are not a condition of employment. Personnel performing these tasks are OR data systems coordinators.
- (D) Procedure
- (1) Storage of sterile supplies will be as described in policy [3364-124-21 Storage of Sterile Supplies](#).
 - (2) All personnel entering the operating suite will be attired in proper apparel as described in [operating room guideline Operating Room Attire](#).
 - (3) The operations supervisor or designee will monitor employee health daily. Case assignments will be made accordingly. Considerations:
 - (a) Personnel with open and potentially infected wounds shall not be assigned to scrub.
 - (b) Personnel receiving wounds (e.g., needle sticks, cuts, etc.) will report the incident to the operations supervisor and complete an occurrence report and report to the emergency department.

<p>Approved by:</p> <p>/s/</p> <hr/> <p>Daniel Barbee, MBA, BSN, RN, FACHE Chief Executive Officer</p> <p>12/19/2025</p> <hr/> <p>Date</p> <p>/s/</p> <hr/> <p>Kurt Kless, MSN, MBA, RN, NE-BC Chief Nursing Officer</p> <p>12/18/2025</p> <hr/> <p>Date</p> <p><i>Review/Revision Completed by: Operating Room Management</i></p>	<p>Policies Superseded by this Policy:</p> <ul style="list-style-type: none">• 4-12 <p>Initial effective date: April 1, 1981</p> <p>Review/Revision Date:</p> <p>1982 1983 1984 1985 1986 1987 March 1993 June 1996 January 1999 July 2002 July 2005 July 30, 2008 August 2012 February 1, 2016 August 1, 2019 December 1, 2022 December 2025</p> <p>Next review date: 12/2028</p>
--	---