

<b>Name of Policy:</b> <b>Maintaining the Sterility of an Unused Operating Room with Open Sterile Supplies Present</b>		 <b>Effective date:</b> 12/2025 <b>Original effective date:</b> May 26, 2009	
<b>Policy Number:</b> 3364-124-71			
<b>Approving Officer:</b> Chief Executive Officer			
<b>Responsible Agent:</b> Chief Nursing Officer			
<b>Scope:</b> The University of Toledo Medical Center Operating Room (OR)/Perioperative Services			
Key words: Sterility, Unused Operating Roo, Sterile Supplies, Patient Safety, Sterile Field			
	New policy proposal		Minor/technical revision of existing policy
	Major revision of existing policy	X	Reaffirmation of existing policy

(A) Policy statement

The sterility of an open sterile field is event-related. To increase patient safety and decrease supply waste in the OR, a surgical sterile field set-up may be used if the sterility of the field and opened sterile items can be guaranteed.

(B) Purpose of policy

To provide a process to ensure the sterility of open sterile items and the open sterile field in an OR that is not in use.

(C) Procedure

- (1) In an OR that is not in use but in which sterile items have been opened and set up in anticipation of a surgical procedure (i.e. surgical delay), both OR doors will be taped off or blocked with the Retract-a-Belt, and with a sign indicating the presence of sterile items on the door to discourage entry.
- (2) Sterile fields must be covered with appropriate covering drapes applied using aseptic technique. The sterile field may be covered with the two “cuffed” drape method or with a drape designed for the purposes of covering a sterile field.
- (3) Sterile fields should be opened and prepared as close as possible to the time of use. If the integrity of the sterile filed is preserved and verified, there is no specific

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amount of time that the OR can remain open and subsequently used. The decision to tear down an open, unused OR will be made by the operations supervisor or designee.

- (4) Reference: Guideline for sterile technique. In: Guidelines for Perioperative Practice. Denver, CO: AORN, INC; 2019:931-972.

<p><b>Approved by:</b></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><b>Policies Superseded by this Policy:</b></p> <ul style="list-style-type: none"> <li>• <i>None</i></li> </ul> <p>Initial effective date: May 26, 2009</p> <p>Review/Revision Date: February 1, 2016 August 1, 2019 December 1, 2022 December 2025</p> <p>Next review date: 12/2028</p>
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