Operation Theatre Etiquette

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Zones of OT complex

Outer zone.
Clean zone. **Aseptic zone.**Disposal zone.



Protective zone or outer zone.

- Changing rooms.
- Reception area.
- Waiting area.
- Trolley bay.

OT attire not mandatory in this area.



Clean zone

- Sterilization area.
- Store area.
- Preoperative room.
- Postoperative recovery room.
- OT staff & doctors room.

OT attire is mandatory in this area.



Sterile or aseptic zone

- Scrub area.
- Preparation room.
- OT.
- Area for instrument packing & sterilization.

OT attire is mandatory.



Disposal zone

All unsterile items from the OR should come out through a separate exit which lead to the disposal area directly.

> Sterile & unsterile items should not use the same entrance.



The Do's & Don't of the theatre Etiquette



Do	Don't
Early arrival to the theatre.	Don't arrive late.
Eat & drink prior to entering the theatre.	Don't eat or drink in the theatre.
Dress professionally.	Don't wear jeans, shorts, flip flops or hats.



What not to wear during

Shoes need to tie



surgery







High heels







What to wear during surgery









Hair tie or elastic band



On the day of your surgery, you should take a bath or shower.

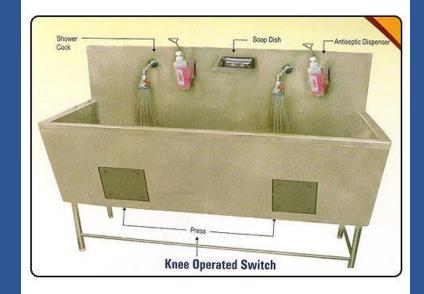
Your medical provider might give you specific instructions for bathing before your procedure.







Equipments for surgical scrubing



- Scrub sink.
- · Scrub brush with nail cleaner.
- Antiseptic solutions.





Surgical scrub

Area to be scrubed?

 Hands & arms up to 1 inches above the elbow.

Benefits -

- Transient microorganisms are removed & resident flora are reduced by-
 - Mechanical friction.
 - · Chemical action for several hours.



Scrub technique

Brush stroke-

- Each surface is scrubbed a designated number of times.
 - Scrub all fingers.
 - 10 strokes per plane per digit.
 - Planes (superior, medial, lateral, inferior).
 - Scrub web between fingers.

Timed method-

• Scrub for a designated time.



Scrubbing

How much time?

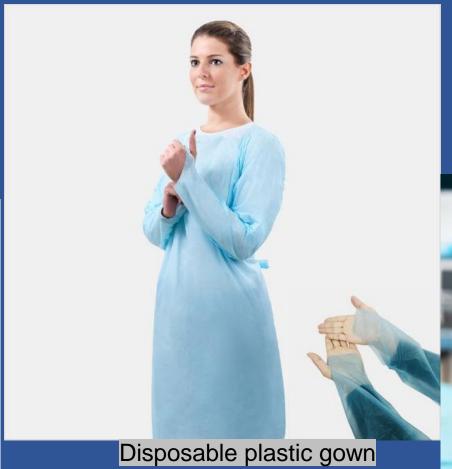
- 1st scrub must always be a full 5 minute.
- Subsequent ones can be 3 minute scrub.
- Accidental touch of anything unsterile at any point, start all over again!

Scrub solutions-

- Povidone-iodine (Betadine),
- Chlorhexidine (Hibiscrub) and
- Triclosan (SkinSan).

Types Gown





Disposable paper gown



Surgical gowning

• Minimize surgical wound infection.

• Protects surgeons from exposure to body fluids.



1. DRY HANDS.



2. PICK UP GOWN.



3. LET GOWN UNFOLD.



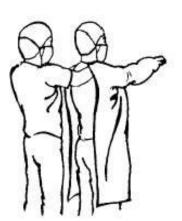
 OPEN TO LOCATE SLEEVE / ARMHOLES.



SLIPARMS INTO SLEEVES.



HOLD ARMS OUT AND SLIGHTLY UP.



CIRCULATOR PULLS GOWN ON.

Gloving technique

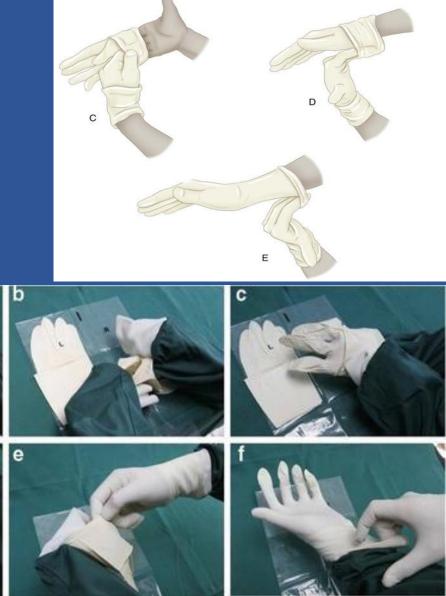
Open-

• For sterile tasks performed by unsterile team members.

Closed-

- Sterile gloves after the sterile gown has been donned.
- Keep hand inside the cuff of the gown.
- Gripping the gloves through your gown.

Assisted method.

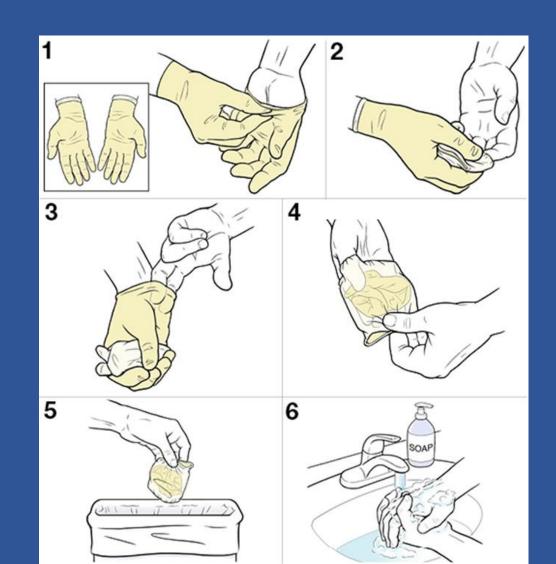


Double Gloving?

- Most hospitals now promote doublegloving for surgical procedures.
- It provides increased protection against needlestick injuries and blood-borne virus transmission.
- Which size will be 1st?



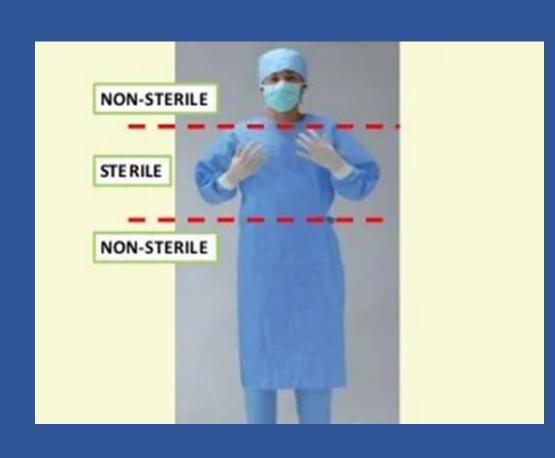
Doffing of gloves



Areas of surgeon after gowning

• Sterile.

Non sterile.





Do & don't Do's



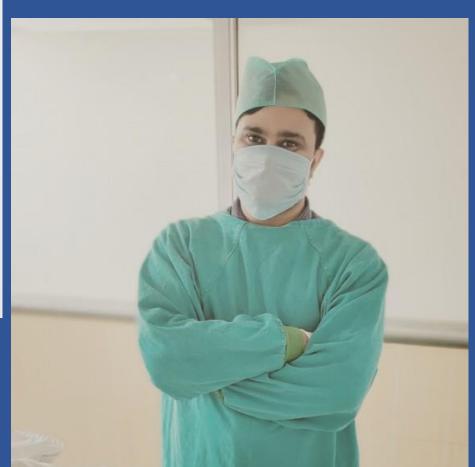






Don't Do's







Behaviour when present in OT

- Use of mobile only in emergency.
- Cell phone should be turned to silent.
- Keep doors closed.
- Keep a good distance(at least 30 cm) from surgical drapes if you are not scrubbed.
- Movement should be minimum.
- The patient should not be left unattended at any time.



Posture as an assistant

Whilst waiting for the patient to be prepped and draped—

- Stand with your hands clasped.
- Clasped at chest or waist height to stop yourself from touching anything dirty.

Position as an assistant

- Always ask the consultant.
- Assistant usually opposite to them or next to them depending on the procedure.

Do's & don't Do's

You can touch the things in front of your gown above your waist.

- Prepped surgical field.
- Draped area.
- Instruments that the scrub nurses give you.

Can't touch anything outside this area.

During operation

- · Speak clearly if needed.
- Don't whisper.
- Do exactly what you are asked to do.
- If you are asked to do something you don't hear or understand, ask the surgeon to explain exactly what they need.
- If you drop something don't pick it up! Apologise and say clearly "mop on the floor" or "forceps on the floor". This is very important to make sure nothing goes missing for the count.

After the operation

- Green laundry bin (for reusable gowns) or the orange clinical waste bin (for disposable gowns).
- Check your gloves for holes. Remove & place them in the orange clinical waste bin.
- Check your hands for any bloodstains or cuts.
- Finally, remove your **mask** and place it in the orange bin too.
- Then go and wash your hands thoroughly for a minute or so.

Last but not the least

- Prepare & label any microbiology / histopathology samples.
- Write the operation note.
- Sign off the WHO checklist and final count.
- Write your surname on the OT note as an assistant.



