



INODAYA Hospitals - Kakinada

Documentation code:

INH/COP .Doc.No:32

QUALITY ASSURANCE PROGRAM ON SURGICAL PROCEDURE

Prepared Date: 11/11/2025

Reference: COP.14i&j.NABH Standards – 6th Edition

Issue date: 11/11/2025

Issue no:1

Review NO:00

Review Date: 10/11/2026

INODAYA HOSPITAL – OPERATING THEATRE (OT) QUALITY IMPROVEMENT & PERIOPERATIVE SAFETY POLICY

1. Purpose

Inodaya Hospital is committed to delivering **safe, evidence-based, high-quality perioperative care**. The OT will systematically:

- Monitor care-related outcomes
- Identify and mitigate risks
- Prevent avoidable adverse events
- Implement corrective actions for continuous improvement

2. Scope

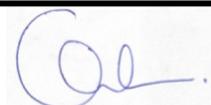
This policy applies to **all OT personnel**, including:

- Surgeons
- Anesthesiologists
- OT nurses and scrub nurses
- Technicians
- Housekeeping and support staff

3. Definitions

Term	Definition
Adverse Event	Any unintended injury or complication caused by medical management
Intraoperative	Cautery burns, patient falls, pressure sores, positioning injuries, wrong-site

Page 1 of 6

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Consultant Anesthesiologist	Medical Director	Chief Executive Officer



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Term	Definition
Mishaps	surgery, retained surgical items, equipment failure, anesthesia complications
Perioperative Events	Any event occurring from pre-op preparation to PACU discharge
SSI	Infection within 30 days post-op (or 90 days for implant surgeries)
DVT	Deep vein thrombosis occurring perioperative or during recovery

4. Responsibilities

The following personnel are responsible for ensuring perioperative safety:

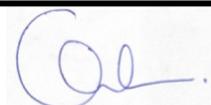
- **OT Nurses** – Pre-op preparation, surgical counts, patient positioning
- **Surgeons** – Surgical site marking, antimicrobial prophylaxis, correct procedure
- **Anesthesiology Team** – Patient monitoring, airway management, medication administration
- **Quality Team / ICN** – Surveillance, audits, data analysis, corrective actions

5. Preoperative Preparation

All patients must undergo standardized pre-op assessment, including:

1. **Identity verification** using two identifiers
2. **Procedure confirmation:** Name, site, side, informed consent
3. **Medical review:** History, allergies, comorbidities
4. **Fasting status and vitals**
5. **Investigations:** Labs, imaging, anesthesia fitness (ASA status)
6. **DVT risk assessment** and prophylaxis if indicated
7. **Skin and pressure point assessment**

Page 2 of 6

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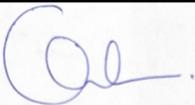
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8. **Antimicrobial prophylaxis** 30–60 minutes before incision
9. **Medication review** (e.g., anxiolytics, insulin)
10. **Removal of jewelry, dentures, contact lenses, nail polish, prostheses**
11. **IV access** confirmation
12. **Implant, instrument, and consumable availability**
13. **Imaging availability** (OT or PACS)
14. **Communication of special equipment** needs
15. **Completion of pre-op nursing checklist**
16. **WHO Surgical Safety Checklist – Sign In**

Note: Patient transfer to OT is allowed only after all checks are verified and documented.

6. Antimicrobial Prophylaxis

- Surgeon determines need based on surgery type (clean, clean-contaminated, contaminated)
- Anesthesiologist reviews **allergies, renal function, previous antibiotic use**
- Antibiotic selected per **Inodaya Hospital Antibiotic Policy**
- Administered **30–60 minutes pre-incision** (60–120 minutes for prolonged infusion drugs)
- Document: Name, dose, route, time, and administering staff in anesthesia record and WHO checklist
- **Intraoperative re-dosing** for surgeries >3–4 hours, blood loss >1500 ml, or short half-life drugs

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- Post-op antibiotics only if indicated; all doses documented in PACU and ward medication chart
- Monthly compliance review by **Pharmacy and IPC team**

7. Intraoperative Safety Requirements

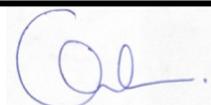
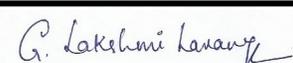
- Conduct **WHO Surgical Safety Checklist – Time-Out** before incision
- Verify electrosurgical equipment, grounding pads, drapes, and skin integrity
- Secure patient: OT table brakes, side rails, positioning with padding
- Monitor sterile field; maintain aseptic technique
- Perform **surgical counts** of instruments, sponges, needles
- Continuous **anesthesia monitoring** and documentation of all events

8. Perioperative Events Monitoring

- **Surgical Site Infections (SSI)** – Document for 30 days (or 90 for implants)
- **DVT/PE events** – Monitor and review compliance with prophylaxis
- **Anesthesia events** – Airway difficulty, hypotension, cardiac arrest, medication errors
- **Intraoperative mishaps** – Cautery burns, pressure sores, nerve injury, patient falls, retained items, equipment failures
- **Unplanned return to OT** – Root cause analysis
- **PACU monitoring** – Post-op nausea, vomiting, and pain control

9. Intraoperative Mishap Reporting

Page 4 of 6

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All incidents must be **promptly reported and documented:**

- Cautery burns, patient falls, nerve injuries, pressure sores
- Wrong-site, wrong-procedure, or wrong-patient surgery
- Equipment failure or malfunction
- Surgical fires or fire-related incidents
- Medication errors
- Breaches in sterility
- Retained surgical items

10. Monitoring Indicators (Monthly)

Indicator	Target / Notes
SSI rate	Track all cases
DVT incidence	Track and review prophylaxis compliance
Cautery burn incidents	Reduce to minimum
Patient falls	Track and prevent
Positioning nerve injury	Monitor and prevent
Pre-op checklist compliance	100%
Antibiotic prophylaxis compliance	Administer within 60 min pre-incision
Surgical Safety Checklist completion	100%
Retained items	Target: 0
Equipment failure	Track and investigate
Hand hygiene compliance	100%

11. OT Environmental Quality Assurance

Page 5 of 6

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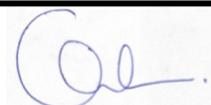
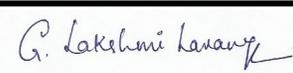
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- **HEPA Filter Validation:** Twice a year
- **Pressure Monitoring:** Daily, min 2.5 Pa
- **Humidity:** Daily, 20–60% (ideal 55%)
- **Temperature:** Daily, 21°C ±3°C
- **AHU Filter Cleaning:** Every 15 days
- **Daily Terminal Cleaning**
- **Monthly Microbial Swabs**

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