

Perioperative Services Competency Assessment - Vanderbilt University Medical Center

Isolation Protocols	Interpretation	Rationale
A. Verbalizes appropriate use of standard precautions when caring for all patients in the perioperative setting.	<ol style="list-style-type: none"> 1. Standard precautions apply to exposure or potential for exposure to the following: <ol style="list-style-type: none"> a. Blood and all body fluids, secretions, and excretions (except perspiration) b. Non-intact skin c. Mucous membranes 2. Risk of exposure to potentially infectious agents is minimized by using personal protective equipment (PPE), work practices, and engineering controls. 3. Uses proper technique for: <ol style="list-style-type: none"> a. Handling linen b. Safety devices (IV cannulas/needles, transfer devices) c. Disposing of sharps d. Disposal of infectious and regulated medical waste e. Storing clean and sterile supplies f. Collecting and transporting lab specimens g. Managing blood spills 4. Describes procedures for managing a needle stick or blood borne pathogen exposure per Vanderbilt Policy (listed in rational) 5. Demonstrates proper cleaning and decontamination of medical equipment using appropriate cleaning agents. 	<ol style="list-style-type: none"> 1. Prevents transmission of diseases to patients and/or staff. 2. Vanderbilt Policy – Bloodborne Pathogens Exposure Control Plan
B. Demonstrates appropriate methods of performing hand hygiene.	<ol style="list-style-type: none"> 1. Hand hygiene should be performed at the following times: <ol style="list-style-type: none"> a. Beginning of shift b. Before and after patient contact c. After removing gloves d. Before and after eating e. Before and after using the restroom f. Anytime there is a possibility of contact with blood or body fluids g. Anytime hands are soiled 	<ol style="list-style-type: none"> 1. Prevents transmission of diseases to patients and/or staff.
C. Verbalizes appropriate use of protective barriers to reduce risk of skin and mucous membrane exposure to potentially infectious materials.	<ol style="list-style-type: none"> 1. Gloves should be worn when touching blood or body fluids or when handling items contaminated with blood or body fluids. 2. Double-gloving is recommended during invasive procedures. 3. Change gloves between patients and/or procedures. 4. Masks and eye protection or a face shield should be worn to protect mucous membranes of the eyes, nose, and mouth from splashes and sprays. 5. Gowns should be worn to protect skin and/or prevent soiling of clothing during procedures and other patient care activities when contact with blood or body fluid is likely. 6. Gowns should be worn for direct patient contact if the patient has uncontained secretions or excretions. 7. Do not reuse gowns, even for repeated contact with the same patient. 	<ol style="list-style-type: none"> 1. Minimizes risk of cross contamination among staff, patients, and their environment
D. Verbalizes work practices that help to minimize risk of exposure to pathogens.	<ol style="list-style-type: none"> 1. The following activities are prohibited in the patient care area: <ol style="list-style-type: none"> a. Eating b. Drinking c. Smoking d. Applying cosmetics or lip balm e. Handling contact lenses 2. Food and drink should not be stored where potential exposure to blood or other infections materials could occur. 3. Food and drink should not be present in the restricted and semi-restricted areas of the surgical suite. 4. All equipment and environmental surfaces should be cleaned and decontaminated between procedures. 	<ol style="list-style-type: none"> 1. Minimizes risk of cross contamination among staff, patients, and their environment.
E. Verbalizes appropriate measures to implement for patients on Airborne Precautions.	<ol style="list-style-type: none"> 1. Airborne Precautions apply to diseases spread long distances via air currents. Diseases in this category include but are not limited to: <ol style="list-style-type: none"> a. Pulmonary tuberculosis (TB) b. Measles c. Varicella (chicken pox) d. Bioterrorism agents (e.g. SARS, smallpox) 2. Post the blue “Airborne Precautions” sign and the red “No Traffic” sign on the OR door. Signs can be found in the Isolation Tool Kit in each OR suite. 3. All staff must wear N-95 respirators when entering the OR. 4. Remove the N-95 respirator upon exiting the OR and perform hand hygiene. 5. All staff must undergo N-95 fit testing on an annual basis. 6. Airborne Precautions cases should be scheduled at the end of the surgical day. 	<ol style="list-style-type: none"> 1. Reduces risk of exposure to potentially infectious materials.

<p>F Verbalizes appropriate measures to implement for patients on Droplet Precautions.</p>	<ol style="list-style-type: none"> 1. Droplet precautions apply to diseases spread via close contact with respiratory secretions. Diseases in this category include but are not limited to: <ol style="list-style-type: none"> a. Influenza b. Pertussis c. Mumps d. Meningitis e. Fifth disease 2. Post the green “Droplet Precautions” sign and the red “No Traffic” sign on the OR door. Signs can be found in the Isolation Tool Kit in each OR suite. 3. Wear a surgical mask when entering the OR. 4. Wear gloves when handling items contaminated with respiratory secretions. <ol style="list-style-type: none"> a. Perform hand hygiene upon exiting the OR. 	<ol style="list-style-type: none"> 1. Reduces risk of exposure to potentially infectious materials.
<p>G. Verbalizes appropriate measures to implement for patients on Contact Precautions.</p>	<ol style="list-style-type: none"> 1. Contact precautions apply to diseases transmitted by direct contact with the patient’s skin and/or infections substances, as well as through indirect contact with the patient’s environment. Diseases in this category include but are not limited to: <ol style="list-style-type: none"> a. Methicillin Resistant <i>Staphylococcus aureus</i> (MRSA) b. Vancomycin Resistant <i>Enterococcus</i> (VRE) c. Clostridium difficile d. Congenital rubella e. Lice f. Scabies g. Resistant organisms such as <i>Acinetobacter baumannii</i> h. All patients with burns and/or large wounds 2. Wear gown and gloves upon entry into the OR, even if not in direct contact with the patient. 3. Remove PPEs and perform hand hygiene upon exiting the OR if not involved in patient transport. 	<ol style="list-style-type: none"> 1. Reduces risk of exposure to potentially infectious materials.
<p>H. Verbalizes responsibilities of the circulating nurse in preparing for and Isolation Precautions case.</p>	<ol style="list-style-type: none"> 1. Obtains Isolation Cart and Isolation Tool Kit (if available), both are to remain outside the OR in the corridor. 2. Posts appropriate isolation precautions signs on OR doors. 3. Posts “No Traffic” signs on OR doors. 4. Ensures all supplies needed for the case are available in the OR. 5. Removes all unnecessary equipment from the OR before the case begins. 7. Closes all cabinets (cannot be opened once patient enters the OR). 8. Ensures all staff involved in cases don appropriate PPE before patient enters OR. 9. Ensures all staff removes PPE and perform hand hygiene upon entry and exiting the OR. 10. Notify PACU 30 minute prior to patient transfer if patient is on droplet or contact precautions. 	<ol style="list-style-type: none"> 1. Reduces risk of exposure to potentially infectious materials.
<p>I. Verbalizes protocol for managing patients with known or suspected Transmissible Spongiform Encephalopathies (TSE), including Creutzfeldt-Jakob Disease (CJD).</p>	<ol style="list-style-type: none"> 1. Notify neurosurgery manager/charge nurse and Infection Control and Prevention for all suspected cases. 2. Use disposable instruments on all brain biopsies for suspected spongiform encephalopathies. 3. Use single-use liquid repellent sterile OR gowns, gloves, masks, face shields or goggles, linens, and covers. 4. Cover all non-disposable equipment. 5. Maintain one-way flow of instruments. 6. Mark all specimens with a biohazard label and a “Neuro Precautions” label, and notify departments receiving the specimens. 	<ol style="list-style-type: none"> 1. Vanderbilt Policy - Creutzfeldt-Jakob Disease (CJD) and other Transmissible Spongiform Encephalopathy Disease Precautions