STANDARD OPERATIN G PROCEDURES DIVISION OF COMPARms66 b5l3075IVE MEDICINE N O SOUTH FLORIDA

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- d. Any excess liquid on the surgery table or patient should be removed by wiping/blotting with sterile paper towels and/or gauze sponges prior to draping the patient, being careful not to contaminate the prepped area.
- e. Sterile surgical drapes should be used to isolate the disinfected area from surrounding areas. Cover a mayo stand or table with a sterile drape on which sterile instruments are placed. The gowned and gloved surgeon/surgical team should drape the surgical patient. To be effective, a drape must fit tightly to the skin and must be impermeable to moisture. Clamps or sutures may be used to fix the drape in place. Self-adhesive drapes are also useful and are recommended. In some cases a drape may not be practical or necessary, but the surgeon must make every effort to perform procedures using aseptic technique.
- 3. Preparation of the surgeon/surgical team
 - a. The surgeon/surgical team should wear a scrub suit, surgical mask, hair cover, and shoe covers. Rings, watches, and bracelets should be removed prior to surgical hand antisepsis.
 - b. Prior to scrubbing, the surgeon(s) or their assistant(s) should open their gowning packs being careful not to touch the sterile gown and towel. The contents are either dropped on an already sterile draped surface or remain on the wrap of the gown/towel, which is sterile inside. The same applies to the sterile gloves.
 - c. Surgical hand antisepsis using either an antimicrobial soap or an alcohol-based hand rub with persistent activity (e.g., Avagard [™]) is required before donning sterile gloves.
 - 1. Remove debris from underneath fingernails using a nail cleaner under running water.
 - Surgical hand antisepsis should be performed using an antimicrobial soap. Scrub hands and forearms for the length of time recommended by the manufacturer, usually 2--6 minutes. Make sure that all surfaces of the fingers, hands and forearms are included.
 - 3. If an alcohol-based surgical hand-scrub product with persistent activity is used, follow the manufacturer's instructions. Before applying the alcohol solution, prewash hands and forearms with an antimicrobial soap and dry hands and forearms completely. After application of the alcohol-based product, allow hands and forearms to dry thoroughly before donning sterile gloves.
 - 4. Always hold the hands high with the elbows flexed away from the body to prevent recontamination.
 - d. After entering the OR, the surgeon should dry his/her hands by picking up a sterile towel at one end with one hand and drying the opposite hand/arm working from hand to elbow. The opposite end of the towel is then grasped with the dry hand and the wet hand/arm is dried in the same fashion. The towel is then discarded.
 - e. The surgeon should hold a sterile folded gown at the inside of the shoulder, being careful not to touch the outside of the gown. The gown is lifted away from the table. After the gown has been allowed to straighten out, the arms are inserted into the sleeves. A non-scrubbed person

standing behind the surgeon should tie the top and the waist strings, be careful to not touch the outside front of the gown.

Gloving can be performed using either a closed or open technique. With f. the closed gloving method the hands won't be pushed through the gown wristlets. The cuff of the glove should be grasped through the material of the gown sleeves and folded over the gown wristlet of the other hand. The fingers/hand can then be advanced into the glove with the help of the other hand, which is still covered by the sleeve. The gloved hand repeats this procedure for the ungloved hand, which is still covered by the gown sleeve. The gloves are then adjusted for comfort. When performing the open gloving technique, the hands should be pushed through the gown wristlets, but held away from the body. One of the gloves is lifted by its turned-down cuff edge and pulled on with a rotating motion being careful not to touch the outside of the glove nor the gown. The gloved hand then repeats this procedure holding the glove beneath the rolled cuff (outside of glove) being careful not to touch the fingers of the other hand. The cuff of the gloves should be advanced over the wristlets with gloved hands slipping beneath the cuff (outside of glove).

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