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Owner: Loris Cook: Manager, Operating Room Unit
Policy Area: Operating Room
References:

Traffic Patterns in the Surgical Suite, 30.13.02

Document Type: Policy, Guideline

POLICY:

To provide guidance for traffic patterns in the Operating Room department and adjacent areas. Traffic control patterns suggest movement into, and out of, the surgical suite, as well as movement within the suite. Clearly defined and enforced traffic control practices protect personnel, patients, supplies and equipment from potential sources of cross-contamination, safeguard the privacy of patients, and provide security.

GUIDELINE:

The Operating Room department is divided into to three designated areas that are defined by physical activities in each area. Environmental and dress controls increase as progression is made from unrestricted to restricted areas.

DEFINITIONS:

- **Unrestricted Area:** This includes corridors and rooms connected to public areas on one side and often restricted areas on the other, including but not limited to, employee locker room or lounge, PACU, and desk area. Street clothes are permitted in this area.
- **Semi-Restricted Area:** This area describes most of the peripheral support areas of the surgical suites. Corridors, clean core, sub-sterile rooms, anesthesia work room, and equipment storage are included in this category. Traffic is limited to authorized personnel and patients only. Surgical attire with head covering, jackets, and facial hair covering is required.
- **Restricted Area:** This includes the OR suites when sterile supplies are open. Scrub attire, jackets if not scrubbed in, head and facial hair covering, and masks will be worn in these areas. Compliance with Dress Code Policy is required in these areas.

GUIDELINES:

- Patients entering the Operating Room will have clean linens and gowns and their head should be covered with a disposable bouffant. They routinely enter from PAU and exit directly to PACU. Patients are transported on stretchers or beds typically.
- Doors to all operating room suites should remain closed once sterile supplies are open through the completion of any surgical procedure. This maintains proper air exchanges in each suite, optimizing the infection control principles important to each procedure.

- Factors within the suite that increase air turbulence, such as movement, number of people in the room, talking, should be minimized while sterile supplies are open or the patient is in the suite.
- Life threatening patient emergencies or fire and safety hazards may necessitate modification of traffic control practices. Appropriate accommodations are at the discretion of the staff in the room to best care for the patient.
- Movement of clean and sterile supplies/equipment should be separated as much as possible from soiled equipment/waste by space, time or traffic patterns. Clean and sterile supplies will be transported to the OR using the clean elevator from the Sterile Processing Department. They may be transported in a covered, open cart, or hand carried.
- Materials are removed from external shipping containers/boxes/cartons or uncovered in an unrestricted area before transfer to an OR area. Shipping containers, etc. are subject to dust, insects, and the like which can transfer to this restricted area. Cardboard boxes are not permitted in semi-restricted or restricted areas.
- If equipment is brought in from outside, it will be wiped down with an approved disinfectant prior to moving into the semi-restricted area. It is the responsibility of the person using that equipment to do so.
- Soiled supplies, instruments, equipment needing reprocessing, trash, and soiled linen are contained in the OR suite or immediately adjacent to the suite, prior to transport. All items are transported through the semi-restricted corridor to the appropriate receiving location. Covering of these items is as important during transport as clean or sterile items. All used/soiled items are taken to the soiled utility area. Linen and waste is placed in corresponding receptacles, while instruments and equipment needing reprocessing are transported up the soiled utility elevator in a closed cart to the decontamination area in SPD (Sterile Processing Department).
- Clean or unused items needing to be returned to the clean areas are placed in the Core for return or "put away."
- Hallways must be kept clear for safe passage of patients and proper allowances for fire/emergency egress.
- The exit door leading to the stairwell in the back of the department is activated with an audible alarm if opened, either from the inside or outside. It stops alarming when closed but access is restricted to authorized personnel only. This door should not be used for entry.
- Clean supplies and deliveries are received at the door near the nurse's station.
- Clean instrument carts and internally delivered supplies are transported via the clean elevator from SPD.
- Other equipment or supplies may be delivered/picked up directly to the Soiled utility using the side door entrance from PACU. This may include trash receptacles, recycle containers, and pathology specimens.

Attachments:

No Attachments

Approval Signatures

Approver	Date
Kirk Harper: VP, Nursing & CNO	08/2017
Crystal Wise: Administrative Assistant	07/2017
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