

Department of Anesthesia Services
Surveyor Readiness Assessment Tool

Name (print): _____

Date: _____

1. **Circle the best answer:** To prepare for the move to UMC,
 - a. A generic tour was taken by ALL anesthesia providers
 - b. A department specific tour was taken by ALL anesthesia providers
 - c. All were in-serviced on all new equipment and all had opportunities to ask questions
 - d. Opportunities were given to roam the building and to further become familiar with new equipment
 - e. Mock drills were conducted to assess flow and processes
 - f. All of the above.

2. **True or False?** _____
 Fluids must have a "change" label affixed with a 24 hour expiration time.

3. **True or False?** _____
 Scrub the Hub! Requires rubbing the hub for 10 to 15 seconds; allow it to dry prior to the initiation of administration of medications.

4. **True or False?** _____
 Medications may NOT be carried in pockets or clothing unless they have been placed in a bag prior to placement in a pocket.

5. **Circle the Best Answer:** All are true EXCEPT?
 - a. Remove gloves (**clean and dirty**) and sanitize hands before using the computer or touching/handling stored supplies and equipment, when it is safe to do so.
 - b. Upon case completion, wipe down all reusable items, cart, anesthesia machine (special attention to handles and knobs/ switches) and the computer keyboard. (In the event it was touched with soiled hands to prevent cross contamination.)
 - c. Close ALL bins on the anesthesia cart to prevent cross contamination.
 - d. All carts are to remain locked when not in use (even when present).
 - e. Wearing hospital laundered scrubs are optional for anesthesia providers.

6. **True or False?** _____
 Blades should remain connected to handles after checking the light/battery.

7. **True or False?** _____
 Do not open supplies or equipment in the OR, except the circuit, if there is not a case pending.

8. **True or False?** _____
 All supplies and equipment (laryngoscope blades) with broken seals are discarded every morning by 0900.

9. **Fill in the Blank:**
 PDI Super Sani-Cloth wipes are used to clean anesthesia equipment that remain on the unit. After wiping an item, it must remain WET, even if re-wiping is required, for _____ minutes. ALSO REFERRED TO AS "WET TIME".

10. **Fill in the Blanks:**

Actively participate in the TIME OUT; if you must turn away from surgical field to confirm the MR#, face the field for the remainder of the time out and **verbalize** concern(s), antibiotics, agreement, etc. **ALL OTHER ACTIVITY** _____ **DURING THIS TIME.** Additionally, state your _____ and _____.

11. **True or False?** _____

All medications/syringes/needles should be discarded in accordance with the Pharmaceutical Waste Guide.

12. **True or False?** _____

Cover non-disposable scrub hats with disposable hats and remove upon departure from the OR suite.

13. **True or False?** _____

Wear lab coats when leaving the 4th floor.

14. **True or False?** _____

Masks are single use only (on or off only).

15. **True or False?** _____

Gas shut off valves are located outside each Operating Room, by the scrub sinks. In the event of an airway fire/ emergency – the CRNA/MDA delegates the physical function of turning off the gas(es) to a specific person in the OR, when necessary.

16. **True or False?** _____

In the event of an emergency (fire, power outage, etc), if unassigned to a patient, please report to the OR desk for instructions, if you can get there safely.

17. Circle the best answer: Smoke barrier boundaries on the 4th floor consist of:

- a. Office space directly in front of each OR pod to Tulane, for each of the 3 pods; Office space directly in front of the Invasive Lab, the Invasive Lab pod to Tulane Avenue – 4 total
- b. Office space directly in front of each OR pod to Tulane, for each of the 3 pods; Office space directly in front of the Invasive Lab, the Invasive Lab pod to Tulane Avenue; Pre-post that begins behind Surgery offices, separated into 2 banks (all that is to the left and behind the charge CRNA office and all that is right and behind the OR Desk) which does not include the hall way behind Endoscopy/Locker rooms.
- c. There is no smoke barrier
- d. 4th floor is one big smoke barrier

18. Circle the best answer: For Performance Improvement initiatives, the Department of Anesthesia Services audits:

- a. Pre-anesthetic assessments
- b. Hand off (Report)
- c. Time Out (for ALL invasive procedures (i.e. arterial line placements, peripheral blocks, etc)
- d. Trach cases to assess fire safety practices
- e. Antibiotics administration
- f. Hypothermia
- g. All of the above

19. **True or False?**

Anesthesia personnel will verify the surgical consent and confirm the correct procedure, side, structure or level BEFORE sedating the patient. _____

20. **Circle the best answer:** All of the following are True EXCEPT:

When problems are identified in the Department of Anesthesia Services, HOW are deficiencies corrected? Deficiencies are corrected via employee education executed:

- a. via hospital orientation
- b. during Monday morning meetings
- c. via emails – individual and group
- d. via posting in WILMA
- e. via one on one sessions

21. **True or False?** _____

Empty labeled syringes are not permitted at any time, for any reason. This is monitored:

- every weekday by Anesthesia Technicians that inspect ORs
- by the CRNAs on duty
- by the Director or designee.

22. **True or False?** _____

Anesthesia Policy and Procedure Manuals are located in WILMA – under the Policy’s tab. All policies are reviewed / revised annually.

23. **True or False?** _____

Reusable anesthesia equipment is cleaned and/or sterilized in accordance with Anesthesia Policy # A-128:

--Devices that touch mucous membranes need high level disinfection or sterilization - will be cleaned or disinfected by Central Sterile Processing.

--Items that do not touch the patient or only touch intact skin are non-critical and need low level disinfection - will be cleaned thoroughly with SANI-CLOTHS and will remain undisturbed for two minutes.

24. **True or False?** _____

Point of Care Testing (POCT): refers to the Hemocue and Accucheck machines. Quality control checks are performed every 24 hours; Hemocue and Accu-chek QC solutions are replaced every 3 months. Cuvettes (Hemocue) are good for 3 months when stored in air tight container. Accucheck strips are good until the manufacturer’s expiration date when they remain in the air tight container.

25. **Circle the best answer:** 2015 National Patient Safety Goals (NPSG): Examples of how Goal 1 – “to identify patients correctly” is incorporated into our daily practice:

- a. Two patient identifiers are used (name, dob, MR#, etc)
- b. Typenex Band for blood administration
- c. Time Out
- d. a, b and c are correct.

26. **True or False?** _____

One should rub hands until dry when a waterless sanitizer has been used? However, when soap and water are used, soap should be worked vigorously on hands for 10-15 seconds. In addition, after the 5th use of waterless sanitizers, hands should be washed with soap and water.

27. True or False? _____

Universal Protocols to prevent wrong patient, site and procedure via Universal Protocol consists of:

- Conducting Pre-Procedure Verification Process (pre-op assessment)
- Marking the procedure site

28. Circle the best answer: How are Medications handled/secured?

- a. Medication are never left unattended, and are secured in the Omnicell
- b. Medications are aspirated into syringes, THEN, labels are affixed and completed with concentration, date, time and initials.
- c. All unused medications are wasted upon the completion of each case
- d. a, b and c are correct

29. Circle all correct answers: Schedule IV Medications (controlled) are:

- a. Accounted for at all times.
- b. The responsibility of the provider that removed them from the Omnicell or the provider that documented accepting the medication.
- c. NEVER left unsecured.
- d. Controlled medication "waste ... will be recorded ... in the automated dispensing system" (Policy 5028).

30. Circle the best answer: If you are asked a question by an Auditor and "can't remember", you are allowed to:

- a. Review your badge buddy for the information
- b. Telling them that you can't remember, but can look it up on UMCNO Companion App located under the Resource section in EPIC under Companion App
- c. Refer to the Companion App that has been downloaded to your phone
- d. Tell them that if you cannot find the answer, you would ~~could~~ call DJ or C'Lita
- e. a, b and c are correct
- f. a, b, c and d are correct

31. True or False? _____

Hand hygiene is required prior to and after patient care.

32. True or False? _____

Syringes are single use ONLY. Immediately discard empty used syringes.