



South Eastman Health/Santé Sud-Est Inc.

	No: SC-PRE010
Approved By: Facility Managers	Source: Regional Client Care Manual Category: Surgical Services
New/Replaces: Date Approved: 30 April 10 Reviewed: Revised:	Subject: Operating Room: Traffic Flow

POLICY

The operating room (OR) shall have clearly defined and enforced traffic control practices to protect personnel, patients, supplies, and equipment from potential sources of cross-contamination; safeguard the privacy of patients; and provide security. Movement between the designated areas should have a transition zone.

PROCEDURE

1. The surgical suite should be divided into three designated areas that are defined by the physical activities performed in each area.
 - a) **Unrestricted Area** (Street clothes are permitted)
 - Includes a central control point that is established to monitor the entrance of patients, personnel and materials.
 - The entrance to the surgical suite should be restricted to authorized personnel.
 - This area includes pre-op holding area, nursing and physician change room.
 - b) **Semi-restricted Area** (Surgical attire and head covering is required)
 - Includes the peripheral support areas of the surgical suite.
 - It has storage areas for clean and sterile supplies, work areas for storage and processing of instruments, scrub sinks, and corridors leading to the restricted areas of the surgical suite.
 - Traffic area to this area is limited to authorized personnel and patients.
 - Personnel are required to wear surgical attire and cover all head and facial hair.
 - c) **Restricted Area** (Surgical attire, head covering and facemask required)
 - Includes any area where scrub personnel are present and/or sterile supplies are opened (i.e. theatre when a procedure is present, scrub sink area when a surgical

- scrub is in progress, areas adjacent to where unwrapped goods are removed and transported to a theatre, etc.)
- The number of personnel in the theatre should be kept to a minimum.
 - All visitor and staff shall wear identification while in the surgical suite.
 - Persons entering the restricted or semi-restricted for a short time for a specific purpose should cover all head and facial hair and must don freshly laundered surgical attire.
2. Movement between the designated areas should have a transition zone. Transition zone exists where one can enter the area in street clothing and exit into semi-restricted or restricted zone in surgical attire.
 3. Patients Attire:
 - a) Patients entering the surgical suite should wear clean gowns, be covered with clean linens, and wear hair coverings to minimize particulate shedding during surgical procedures.
 - b) Patients are not required to wear masks in the surgical suite unless they are under airborne precautions.
 - c) Clean personal undergarments may be worn when they will not interfere with the surgical site or access sites. (i.e. no underwear if catheterization is likely).
 4. All doors to the theatres shall be kept closed at all times:
 - a) Disrupted pressurization mixes the clean air of the OR with the corridor air, which has a higher microbial count.
 - b) The air in the OR should be maintained under positive pressure (as per recommended Canadian Standards Association (CSA) standards of total room air exchanges per hour).
 5. The movement of clean and sterile supplies and equipment should be separate from contaminated supplies, equipment, and waste by space, time or traffic patterns:
 - a) Supplies and equipment should be removed from external shipping containers and web-edged or corrugated cardboard boxes in the unrestricted area before transfer into the surgical suite (as dust, insects and debris may have collected during transport).
 - b) The movement of supplies should be from the clean core through the operating or procedure room to the peripheral corridor (as soiled supplies should not re-enter the clean core area).
 - c) Use of correct procedures for transporting items preserves the quality of the sterile and clean environment.
 - d) Soiled instruments, supplies and equipment should be contained in closed or covered carts or containers for transport to a designated decontamination area.
 6. During construction and renovation, specific traffic patterns should be established and maintained in accordance with applicable provincial/federal regulations.
 - a) Specific traffic plans for construction personnel and movement of supplies and equipment and debris should be developed and implemented following applicable guidelines for construction in healthcare facilities.

- b) Surgical personnel should be able to move from place to place without contaminating their surgical scrubs.
- c) Clean or sterile supplies and equipment must be transported to storage areas by a route that minimizes contamination from the construction site and prevents contact with soiled or contaminated trash and linen.

REFERENCES

1. AORN (2007) Standards, Recommended Practices, and Guidelines. CO: AORN Inc. ORNAC (2007). Recommended Standards, Guidelines, and Position Statements for Perioperative Registered Nursing Practice.
2. Canadian Standards Association (CSA), 2004
3. Communicable disease, Surveillance and Response <http://www.who.int/emc>.
4. World Health Organization (2002) Prevention of hospital-acquired infections: A practical guide (2nd ed). Department of Trillium Health Centre, January 2009, Traffic Flow in the Operating Room