

HIGH DESERT HEALTH SYSTEM AMBULATORY SURGICAL CENTER

SUBJECT: V-110 DRAPING OF PATIENT AND CREATION OF STERILE FIELD	POLICY #: 1235
	VERSION: 1
APPROVED BY: ASC Approvers	
DATE APPROVED: 06/28/2016	

PURPOSE: To provide guidelines for the creation and maintenance of a sterile field.

POLICY: The operative site and necessary equipment are draped using aseptic technique.

PROCEDURE:

I. GENERAL CONSIDERATIONS

- A. Only drapes that meet the criteria for establishing an effective barrier are used.
- B. Only intact materials are used for draping.
- C. Sterile drapes are handled as little as possible.
- D. Drapes should not be shaken, flipped, or fanned.
- E. Drapes are carried folded to areas where they are to be placed.
- F. Once in position, drapes are not repositioned.
- G. During draping procedures, gloved hands are protected from contamination by cuffing a drape edge.
- H. Drapes that have dropped below waist level while being unfolded are not brought into the sterile field. They are discarded.

II. INSTRUMENT TABLES/EQUIPMENT

- A. Drapes are placed only on clean, dry surfaces.
- B. Any equipment brought into the sterile field should be draped.
 1. When available, specialty drapes are used to drape specialty equipment (i.e., x-ray machine, camera).
 2. Drapes used to cover equipment that generate heat must allow for ventilation, to dissipate heat.

III. OPERATIVE SITE

- A. The tips of penetrating towel clips used to secure towels and/or drapes are

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considered contaminated and are not moved until the end of the procedure.

- B. Single sheets, fenestrated drapes, or a combination of both are used to drape from the incision site to the periphery.
- C. Additional areas to be draped include
 - 1. Arm boards
 - 2. IV poles used to allow anesthesia access to patient.
- D. Draping procedures may be modified by anatomical location of incision.

IV. DRAPING OF PATIENT

- A. Head drape: composed of one sterile drape and two towels.
 - 1. Gowned personnel slide sterile drape and two towels under patient's head and wrap the head turban style with the top towel.
 - 2. Secure towel with a towel clip placed away from the patient's eyes.
 - 3. Cover remaining portion of Operating Room table with a large, sterile sheet.
 - 4. During surgical procedures involving the patient's face or head, if possible, the technique of draping should be wide to expose the whole head in order to allow supplemental oxygen, as administered by face or nasal prong, to disperse, thereby, reducing risk of surgical fire.
- B. Abdominal drape:
 - 1. Place sterile drape near the distal prepped area to cover lower part of operative table to further facilitate draping.
 - 2. Place four sterile towels (or more, if needed) to isolate the incision site.
 - 3. Place appropriate lap drape with fenestrated area directly over incision site.

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4. Towel clips used on lap sheet to secure cords, suction, or to make pockets, are to be of non-perforating variety.
5. For inguinal herniorrhaphies and surgery involving the penis and/or scrotum, place a sterile towel under the scrotum at both the completion of prep and prior to commencement of regular draping.

C. Extremity drape:

1. Place sterile drape under the prepped extremity.
2. Place a towel at proximal end of prep and secure with towel clip.
3. Cover extremity with a stockinette.
4. Apply extremity sheet.

D. Lithotomy drape:

1. After prep, place a sterile drape under the buttock.
2. Apply sterile legging drapes.
3. First apply abdominal/perineal drape to abdomen and then position to cover perineum.

REFERENCES:

AORN Standards and Recommended Practices, 2016

The Manual of Operating Room Management

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