



Rancho Los Amigos National Rehabilitation Center

DEPARTMENT OF NURSING

OPERATING ROOM

POLICY AND PROCEDURE

SUBJECT: TRAFFIC CONTROL

Policy No.: OR102
Supersedes: ALL
Revised Date: 03/18
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Purpose of Procedure: To establish the practices which ensure a safe environment for the surgical patients and reduce traffic in the Operating Room. Good traffic control practices protect personnel, patients, supplies and equipment from potential sources of cross-contamination.

Physician's Order: No

Policy Guidelines:

1. All personnel entering the Surgical Suite shall follow the delineated traffic pattern. The area within the Surgical Suite is divided into designated areas that are defined by the physical activities performed in each area.
 - A. Unrestricted area where street clothes are permitted. The entrance of patients, personnel and materials are monitored.
 - B. Semi-restricted where scrub attire is required and all head and facial hair are covered by a surgical cap and/or hood. Traffic in this area is limited to authorized personnel and patients.
 - C. Restricted area (includes operating and procedure rooms), sub-sterile room and scrub sink area where personnel wear full surgical attire and cover all head and facial hair. Masks are required where open sterile supplies or scrubbed persons are located.
 - D. Pre-Op Holding area and Post-Anesthesia Care Unit may be entered by support personnel, e.g. consulting physicians, respiratory care practitioners, etc. and family members in compliance with visitors in the Surgical Suite policy, (1 family member for patients who are minors).

Procedural Steps:

1. All doors to the operating room will be kept closed during the operative procedure except during movement of patients, personnel, supplies and equipment.
2. The number of people in the Operating Room will be limited to the following persons:
 - Four (4) people scrubbing
 - One (1) circulating nurse (2 if indicated)
 - Two observers unless a Total Joint where there will only be one (1) observer. The observer can be a medical representative, medical student, etc.

KEY POINT: Talking and the number of people present should be minimized during procedures. An increase in airborne microorganisms can occur with an increased number of people present.

3. The surgeons and all scrub personnel will wear masks in the room at all times and will remove them when donning the Hood System.
 4. The flow of clean and sterile supplies and equipment should be separated from contaminated supplies, and equipment and waste by space and traffic patterns.
 5. Supplies and equipment should be removed from external shipping containers in the unrestricted area before transfer into the surgical suite.
KEY POINT: External shipping containers may collect dust, debris, and insects during shipment and may carry contaminants into the surgical suite.
 6. Flow of supplies should be from the clean core to the Peripheral corridor. Soiled supplies, instruments, and equipment should not reenter the clean core area.
KEY POINT: Instruments and supplies will not leave the operating room until final surgical count is performed.
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Reviewers: Wilda Tafoya, RN, CNOR

References:

Guidelines for perioperative practice 2017 edition, "Environment of Care, part 2"

04/06 – Revised
09/09 – Reviewed
10/12 – Reviewed
01/16 – Reviewed
03/18 - Reviewed