

# **Orientation Program for Junior Residents Batch 2021 (joining 2022)**

## **Topics:**

- 1. Operation Theatre Etiquettes – Dr Pratik**
- 2. OT checklist- Dr Subin**
- 3. Contents of Difficult Airway Trolley – Dr Rohan**
- 4. How to Proceed with Anaesthesia – Dr Manish**
- 5. Anaesthesia Machine Checklist- Dr Payal**

## Operation Theater Etiquettes:

- Sterile zones: Outer zone
  - Clean zone
  - Sterile zone
  - Disposal zone
  
- Wear Clean Scrubs
- All OT gears (caps, masks, slippers)
- Identification
- Hand washing Tutorial
- Biomedical Waste Disposal Tutorial
- Sharps Disposal Tutorial
- Use of shield in radioactive room
- Check patients medical records
- Confirm Patient identity before shifting inside OT
- No long Nails
- No jewellery
- No use of Mobile Phones inside OT
- Good meal before entering OT
- Talk Respectfully with Seniors, Colleagues, Nurses, Staffs & Juniors
- No unnecessary Roaming around in OT
- Communication with Surgeons and Nursing staff
- Stay at your allotted table unless instructed by seniors

## OT Checklist

|   |  |
|---|--|
| Patient: Identity<br>Site<br>Procedure<br>Consent | Planned Procedure  |
| ASA Status  | Operative Plan : Description<br>Site marking<br>Estimated Time   |
| Known Allergy                                     | Medications received : e.g Antibiotics   |
| Difficult Airway                                  | Anaesthetic Requirements : Airway,<br>Invasive monitoring, temperature, Mode<br>of Anaesthesia ( GA/RA/LA) |
| Risk of Aspiration                                | Blood Products : Cross matched<br>Grouped & Reserved   |
| Risk of Blood Loss                                | Patient Positioning & Support  |
| Medications given/held                            | Recovery Room/ ICU backup<br>Confirmation  |
| Risk of blood loss                                |  |
| Tests ordered: Blood<br>ECG<br>X-ray              |  |
| Preoperative Consultations                        |  |

# Contents of Difficult Airway Trolley

|                          |  |
|--------------------------|--|
| <b>Top of trolley</b>    | Flexible Fiberoptic Bronchoscope   |
| <b>Side of trolley</b>   | Bougies (adult/paediatric)<br>Airway Exchange Catheter   |
| <b>Drawer 1 (plan A)</b> | Macintosh Laryngoscope with blades<br>McCoy blade and/or straight blade<br>Video Laryngoscopes<br>Endotracheal Tubes<br>Stylet<br>Magill's Forceps<br>Syringe<br>Stickings |
| <b>Drawer 2 (plan B)</b> | LMA<br>iGel<br>Intubating LMA  |
| <b>Drawer 3 (plan C)</b> | Face Masks<br>Oropharyngeal Airways<br>Nasopharyngeal Airways  |
| <b>Drawer 4 (plan D)</b> | Large Bore Cannula<br>Scalpel (No. 10 Blade)<br>Tracheal dilator or Tracheal hook<br>Cuffed Tracheal Tubes<br>Bougies  |

## **How to Proceed with Anaesthesia :**

Check patient Identity e.g. IPD/OPD no. with admission paper

MLC check (if applicable)

Referral check

Confirm patient identity with surgeons

Procedure (elective/emergency)

Check Consent

Check PAC :

Any investigations advised

Any consultations advised

Blood reserved

NBM status

If paediatric patient :

Consent of parents

Patent IV access

IV fluid status

NBM duration

Explaining patient the mode of anaesthesia (GA/RA/LA)

Attaching monitors : ECG, SPO2, NIBP, Temperature probe

Attach IV fluids

Anxiolysis and Antiemesis

Induction Of anaesthesia

Maintenance, Reversal and Extubation

Shifting Of patient :

Ward (if stable)

Recovery Room

ICU

## Anaesthesia Machine Checklist

Self-inflating bag appropriate for patient's age and an alternate O<sub>2</sub> source available

Machine and wiring secured safely

Power source plugged on, battery backup-sufficient and charging

Pipelines-Quick coupling, tug test, sufficient pressures present

Cylinders-Pin indices, fitted correctly, sufficient gas present (to be checked again if cylinder content is utilised)

Oxygen fail safe mechanism intact-Single hose test, hypoxic guard functioning,

High pitch alarm on discontinuation of O<sub>2</sub>

Oxygen flush works appropriately

Machine leak check-first with vaporiser off, next with individual vaporiser turned on (to be performed again if any vaporiser was replaced)

Flow meters working appropriately through full range of flows

Vaporisers in upright position, filled adequately

Breathing system checked for leak, functioning of one way valves, appropriate breathing system chosen

Sufficient fresh CO<sub>2</sub> absorbent present

Ventilator.functioning appropriately

Appropriate ventilator and alarm settings for patient's age

Suction apparatus-functioning well

Monitors-SpO<sub>2</sub>, ETCO<sub>2</sub>, NIBP can be checked on self, alarm settings adjusted to patient requirements, unwanted monitors turned off, monitor tubing leak free and kink free

Scavenging system appropriately connected and functioning well

