Give Me Five (minutes) for RSIs Free

Warisara Tuvayanon, RN, MNS - Advanced Practice Nurse, Division of Nursing, Faculty of Medicine Siriraj Hospital, Mahidol University, Thailand
Vitoon Chinswangwatanakul, MD,Ph.D–Associate professor, Division of General Surgery, Faculty of Medicine Siriraj Hospital, Mahidol University, Thailand
Orawan Pongraweewan, MD - Associate professor, Division of Anesthesiology, Faculty of Medicine Siriraj Hospital, Mahidol University, Thailand
Rattima Sirihorachai, RN, Ph.D-Lecturer, Faculty of Nursing, Mahidol University, Thailand

Mahidol University
Faculty of Medicine Siriraj Hospital

Clinical Issue:

The unintentional Retained Surgical Items (RSI) is considered a serious adverse events. However, despite healthcare organization increased efforts, RSI events remain occurred each year. The reported incidence of RSIs occurring in 1 of every 1000 to 19,000 procedures performed.[1,2] The majority of RSIs are most often reported in abdomen and pelvis surgery 50.2%[3], cotton gauze sponges account for 48–69%[4] of RSIs. These serious adverse events have drastic consequences on patient, provider, and hospital involving reoperation, prolonged hospital stay/ readmission, infection or sepsis, and death.[5] Performed surgical counting of items before and after use, at the time of surgery, is the method for preventing of RSIs, however 62% of retained surgical items were detected after the surgical count was reported as correct.[4] This suggests that double check protocol could minimize the incidence of RSIs.

Description of team:

A multidisciplinary group was performed which consisted of surgeons, anesthesiologists, advanced practice nurse (APN), perioperative registered nurses (RNs) and practical nurse (non-RNs).The perioperative team are considered accountable for delivering safe surgery, provide environment safety to minimize the risk factors that contribute to RSIs.

Preparation and planning:

The leader of the team collected the incidence report of the abdominal and vascular surgery unit from January 2014 to March 2019, there were 5 RSIs incidences. Leader set up a staff meeting to analyzed Root Cause Analysis for RSIs and the obstacles to eliminating of RSIs. All the team working together to developing guidelines/ work instruction to minimize the cause of RSIs, the unnecessary interruptions during critical task procedures in the operating rooms based on AORN guidelines and literature review.

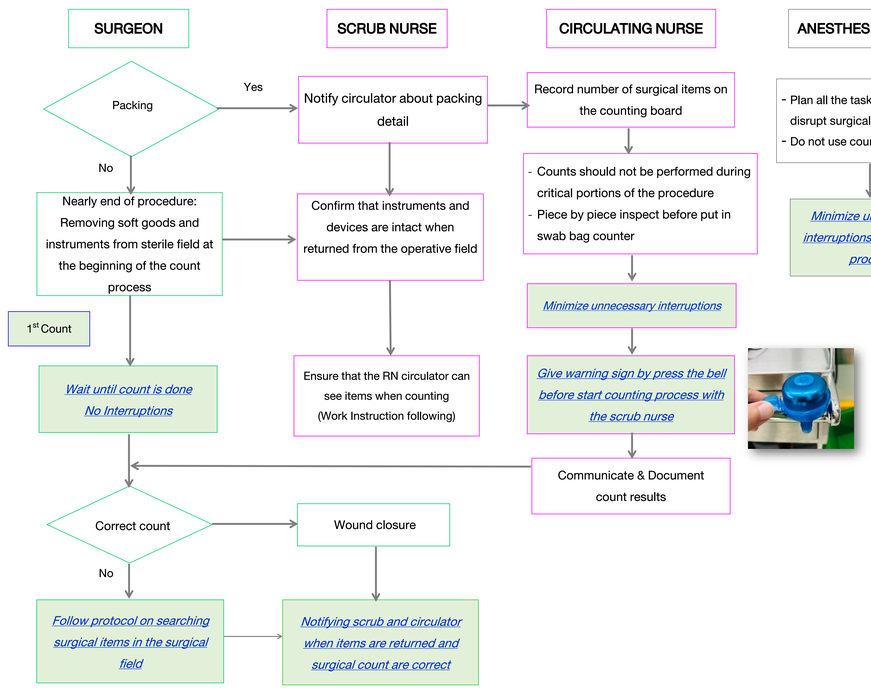
Collected the data and Identify the issues → **Identify cause and possible risk factors (RCA)** → **Develop New Protocol "Give me five (minutes) for RSIs free protocol" and Implemented**

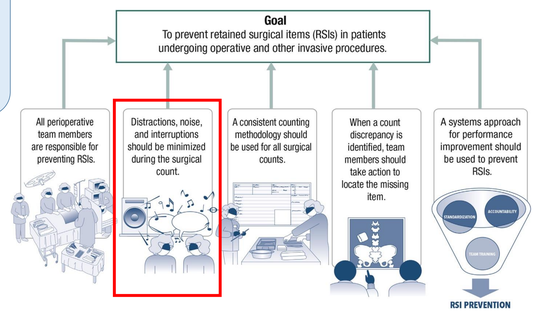
Assessment:

RSIs free protocol" was developed. This protocol approved by the multidisciplinary team before the implemented. Multidisciplinary approach and training were given to all OR staff to make sure that all team member has more assertiveness skills and accountability to work together and compliance to the protocol

Implementation:

This project was conducted in an Operating room abdominal and vascular surgery unit. Staff were educated and trained how to performed Give me five (minutes) for RSIs free protocol. A workflow Give me five (minutes) for RSIs free protocol poster has been posted in the operating room. We divided OR staff into four groups. The first was the team member of surgeon in the operative field, the second was the anesthesiologist, the third was the scrub nurse in the operative field and the fourth was the circulating nurse. The end of the surgery a debriefing was conducted, and the participant's reflective thinking were encouraged. Feedback were provided regarding the Give me five (minutes) for RSIs free protocol.





AORN Guideline for prevention of retained surgical items[7]

Outcome:

Results from the observation on circulating nurses performing 1st surgical counting in 250 patients with abdominal surgery, the results show that mean intraoperative duration was 185.5 minutes (SD=68.3), mean number of abdominal swabs was 66.5 (SD=20.7). Most of circulating nurse were female (94.4%) with mean age of 42.5 years (SD=7.5); 66.7% were registered nurses and 33.3% practical nurses. The first cohort CQI data were collected in 82 patients (November–December 2021). The results show that the incidence of RSIs was zero and the protocol compliance was 35.8% (target ≥ 80%), in the early phase of implemented this project some surgeon was not cooperated, most frequent sources of interruptions were the surgeon interrupted the 1st count process which might make first surgical count incomplete and circulating nurse was not speak up in this situation. Our team discussed about barriers and solution for these issues together. The 2nd cohort CQI data were collected in 75 patients (February–March 2022), the results show that the incidence of RSIs was zero and the protocol compliance was 89.2% (target ≥ 80%). In the last cohort CQI, data were collected in 93 patients (May–June 2022) the result shown that the incidence of RSIs was zero and the protocol compliance was 90.2%

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Implications for perioperative nursing:

RSIs prevention is responsibility of all surgical team members to ensure the patient safety. The Give Me Five (minutes) for RSIs free protocol were modifying from the existing guideline for prevention of retained surgical items, by adding warning sign by pressing the bell before start surgical counting process to minimize interruptions. Therefore, the OR nurse is an important person to protocol compliance, have an assertiveness skill and accountable for what you have said or done during critical task. To ensure maximum safety for nothing left behind in the surgical patients.