

HACKETTSTOWN COMMUNITY HOSPITAL

Division of Nursing

Index: 7430.000
Addendum: #1
Page: 1 of 2
Issue Date: July 1, 1993
Reviewed Date: January 3, 2002

TITLE: MINOR PROCEDURE SAFETY

I. Specific Minor Procedure Safety

A. Pre-procedure endoscopy checks should include the following:

1. Turn on the light source and suction to make sure both are functioning properly.
2. Check the air-water channel for proper functioning.
3. Look through the scope for broken fiber bundles, presence of fluid, or poor visualization.
4. Check for bite marks or indication of damage on scope.
5. Manipulate all control knobs to check for proper function.
6. Test the auxiliary endoscopy equipment prior to use.

B. Electrocautery Precautions

1. Test the electrocautery unit prior to procedure.
2. With the monopolar unit, ground the patient using the return electrode from the electrocautery manufacturer, applying it to the thigh area if possible. Caution must be exercised if patient has a hip pin or an artificial joint--the pad should be placed as far away from hip as possible to avoid burns. Grounding sites should be muscular and well vascularized and not over any bony prominence or large scars that could decrease skin area contact. Alternate sites are the upper biceps, calf or lower back. See the Return Electrode Instruction on the electrocautery unit.
3. The patients' hands and legs should be moved away from the side rails, IV pole, or metal objects during electrocautery use.
4. Check with the physician about the electrocautery settings.
5. Keep the electrocautery machine off, unless planning for use. Keep on "Astandby" mode until the electrocautery is immediately needed, then switch to the "ready" position. Turn the machine off immediately after use.
6. If the patient has a pacemaker, the grounding pad should be placed as far away from the pacemaker to avoid pacemaker malfunction.

7. If a patient has a pacemaker, the patient should be seen by a cardiologist or cardiac rehabilitation nurse to check the pacemaker settings before and after electrocautery use. (See Cardiac Rehabilitation Rolodex in Minor Procedure.)
8. If a patient has an AICD (automatic implantable cardiac defibrillator), the company representative found on AICD card on the Rolodex in Minor Procedure, should be contacted prior to the possibility of electrocautery use for instructions.
9. The staff should avoid contact with the patient during activation of the electrocautery unit.

C. Safety Precautions for Radiation

1. X-ray badges should be worn by all personnel during procedures when radiation exposure is encountered.
2. Lead aprons and other proper shielding precautions must be used by physicians and staff.
3. Pregnant personnel should not assist with x-ray procedures.
4. All female patients of childbearing age should be questioned about the possibility of pregnancy and ruled out during the assessment procedure.
5. While the fluoroscope is in use, personnel should not turn unshielded backs to x-ray unit and should maintain as great a distance as possible.
6. HCH policies regarding x-ray exposure are located in Department of Radiology Manual and should be followed by personnel.

D. Laser Safety

1. The laser unit must be kept off until ready for use, at which time it should be placed in "standby" mode. When the laser is needed for immediate use, it is switched to "Aready" mode. The laser unit should be turned off immediately after use.
2. Appropriate safety goggles should be worn by staff when assisting with laser treatment.
3. Laser maintenance contracts should be kept current.

Reference: MANUAL OF GASTROINTESTINAL PROCEDURES, SECOND EDITION; Marcia Hardick, RN, CGC, Editor; Copyright 1989; Society of Gastroenterology Nurses & Associates, Inc.