PERIOPERATIVE OBSERVATION POLICY

I. PURPOSE
The purpose of this policy is to provide guidelines for the observation of patient care within the confines of the Ambulatory Surgery Center, while maintaining patient safety and privacy in accordance with Accreditation Association of Ambulatory Healthcare (AAAHC) Standards and the Centers for Medicare and Medicaid Services (CMS).

II. SCOPE
All surgery center personne, physicians, allied healthcare and supervised allied healthcare staff.

III. EXCEPTIONS
Those persons not meeting the outlined requirements should make a request in writing to the Director for permission to observe at least 1 week prior to the intended observation experience. In the administrative director’s absence, the ASC Board of Directors President or Vice President or designee will approve exceptions.

IV. DEFINITIONS
ASC: Ambulatory Surgery Center.

V. POLICY STATEMENTS
A. Family members and/or friends of the patient are not permitted in the operating room during a surgical or invasive procedure. This includes all staff members.

B. In the event that a parent/guardian wishes to accompany their minor child through the induction of anesthesia, or a member of the translation staff is asked to accompany a patient to the operating room, the following conditions must be met:
1. The anesthesiologist, surgeon, and O.R. charge and staff nurse all agree that parental presence is in the best interest of the patient.
2. The parent/translator agrees to leave the operating room immediately upon the patient’s loss of consciousness.
3. All observers are to strictly adhere to the Perioperative Dress Code.
C. In order to provide optimal patient care, the number of observers per surgical procedure may be limited. Unless the nature of the procedure dictates to the contrary, the approval will be determined by agreement of the surgeon, O.R. charge nurse, staff nurse, and anesthesia staff.

D. Observers must meet the following criteria:
1. Eighteen (18) years of age or older, unless granted permission as noted in "Exceptions."
2. Have a relevant need to observe, examples include, but are not limited to:
   a. Acting as a consultant for a product that is utilized in a specific procedure.
   b. Participation in a course of study that is health care oriented and observation of the specific surgical procedure is relevant to that study.
   c. Participation in a health career shadowing experience.
3. Observers will not be allowed to enter any operating room or patient care area other than the one for which permission to observe is granted.
4. Observers must have a name tag with their name, title, and company name (if applicable), clearly visible.
5. Observers must be free from evident respiratory infection or communicable disease.
6. Each observer will be monitored by the individual or designee by whom the request was made, i.e. surgeon, anesthesiologist, etc. This individual will be responsible for the observers’ actions.
7. Observers are encouraged to ask the surgical team relevant questions concerning patient care. Should any observer’s behavior be deemed inappropriate or disruptive, they will be asked to leave the room.
8. In patient crisis situations, the observers will be asked to leave the room.
9. Any community media request will be cleared through the ASC administration, the attending surgeon and anesthesiologist, and the patient/family. Internal media request will be handled on an individual basis based on the intent of such requests.
10. The Ambulatory Surgery Center Observation Confidentiality Agreement and Release of Liability must be signed prior to the observation experience by:
   a. The Observer.
   b. Parent/Guardian if the Observer is under eighteen (18) years of age.
   c. An ASC representative, i.e. Educator, Physician, Staff Shadow/Sponsor, Charge Nurse.
11. Persons not meeting those criteria or not granted permission by the Director will not be allowed to enter the operating room/patient care area but may be offered videotapes of specific procedures and/or tours of unoccupied operating rooms/patient care areas.

VI. PROCEDURES
Included in Section V Policy Statements

VII. CROSS REFERENCES
VIII. REFERENCES/CITATIONS
IU Health Partners Policies and Procedures
AAAHC Accreditation Standards
CMS Conditions of Coverage
ISDHI Rules and Regulations

IX. APPENDICES

X. FORMS

XI. RESPONSIBILITY
Operations Committee/

XII. APPROVAL BODY
Board of Managers

XIII. DATES
Approval Date: October 2010
Effective Date: October 2010
Review/Revision Dates: September 2011