Guide to Using this Toolkit

Thank you for downloading the Jackson Medical Surgical Fire Safety Toolkit!

These posters are meant to be placed in operating rooms and written on to indicate pertinent information, such as the location and type of fire extinguishers. These posters are reminders of common fire risks and prevention practices. They are not a replacement for proper staff training and implementation of fire prevention best practices.

If you would like customized posters that are tailored to your facility, please contact us at info@jackson-medical.com.



Assessing Fire Risk

And Taking Proper Precautions

3 = High Risk	3 = High Risk
Circulating nurse Verify fire triangle, including verbal confirmation of the oxygen percentage Ensure appropriate draping techniques to minimize oxygen concentration under the drapes (i.e. tenting, incise drape) Minimize ESU setting Assess that enough time has been allowed for fumes of alcohol-based prep solutions to dissipate (>3 min) Ensure that a basin of sterile saline and bulb syringe are available for fire suppression Activate fire alarm when appropriate	Anesthesia Providers Ensure that a syringe full of saline is in reach for procedures conducted within the oral cavity Document oxygen concentrations and flows Use the MAC circuit for oxygen initially at FiO2 of .30 using fresh gas flows of at least 12 L
2 = LOW RISK, Potentia Standard fire safety precautions are fol high-risk precautions Observe alcohol-based prep drying tim Protect heat sources (e.g. using the ESU Use standard draping procedure	nes (minimum of 3 min)

1 = Low Risk

Standard fire safety precautions are followed



Assessing Fire Risk

And Taking Proper Precautions

3 = High Risk

Circulating nurse

- Verify fire triangle, including verbal confirmation of the oxygen percentage
- Ensure appropriate draping techniques to minimize oxygen concentration under the drapes (i.e. tenting, incise drape)
- Minimize ESU setting
- Assess that enough time has been allowed for fumes of alcohol-based prep solutions to dissipate (>3 min)
- Ensure that a basin of sterile saline and bulb syringe are available for fire suppression
- Activate fire alarm when appropriate

3 = High Risk

Anesthesia Providers

- Ensure that a syringe full of saline is in reach for procedures conducted within the oral cavity
- Document oxygen concentrations and flows
- Use the MAC circuit for oxygen initially at FiO2 of .30 using fresh gas flows of at least 12 L



2 = Low Risk, Potential to Become High Risk

- Standard fire safety precautions are followed w/ the potential to convert to high-risk precautions
- Observe alcohol-based prep drying times (minimum of 3 min)
- Protect heat sources (e.g. using the ESU pencil holster)
- Use standard draping procedure

1 = Low Risk

Standard fire safety precautions are followed



Assessing Fire Risk and Taking Proper Precautions

Was alcohol-based skin antiseptic or other flammable solution used preoperatively? ☐ Yes ☐ No Is the location of the operation being performed above the xiphoid process or in the oropharynx? \sqcap Yes \sqcap No Is the patient receiving oxygen or nitrous oxide? ☐ Yes ☐ No Is an ignition source (fiber-optic light, electrosurgical unit, laser, cutter/burr) being used? ☐ Yes \sqcap No Have you done everything possible to mitigate fire risk? Yes □ No

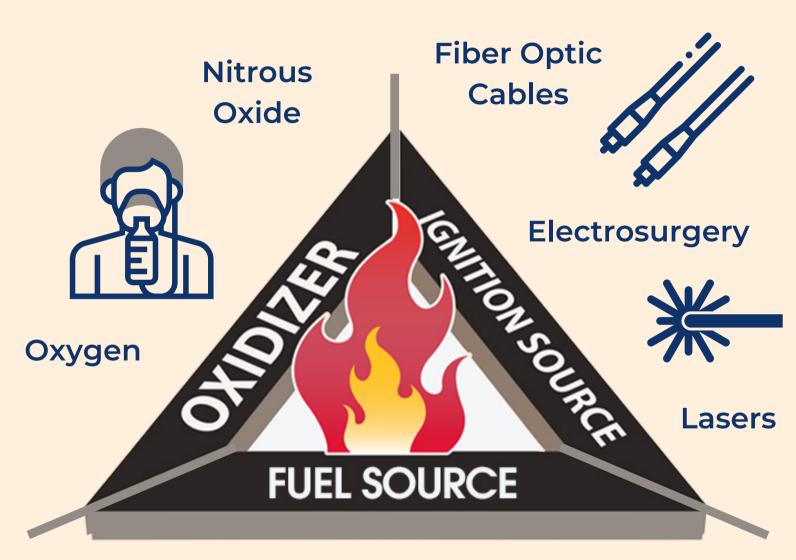
Assessing Fire Risk and Taking Proper Precautions

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Is an ignition source (fiber-optic light, electrosurgical unit, laser, cutter/burr) being used?
☐ Yes ☐ No Have you done everything possible to
mitigate fire risk?





Top Fire Risks in Operating Rooms





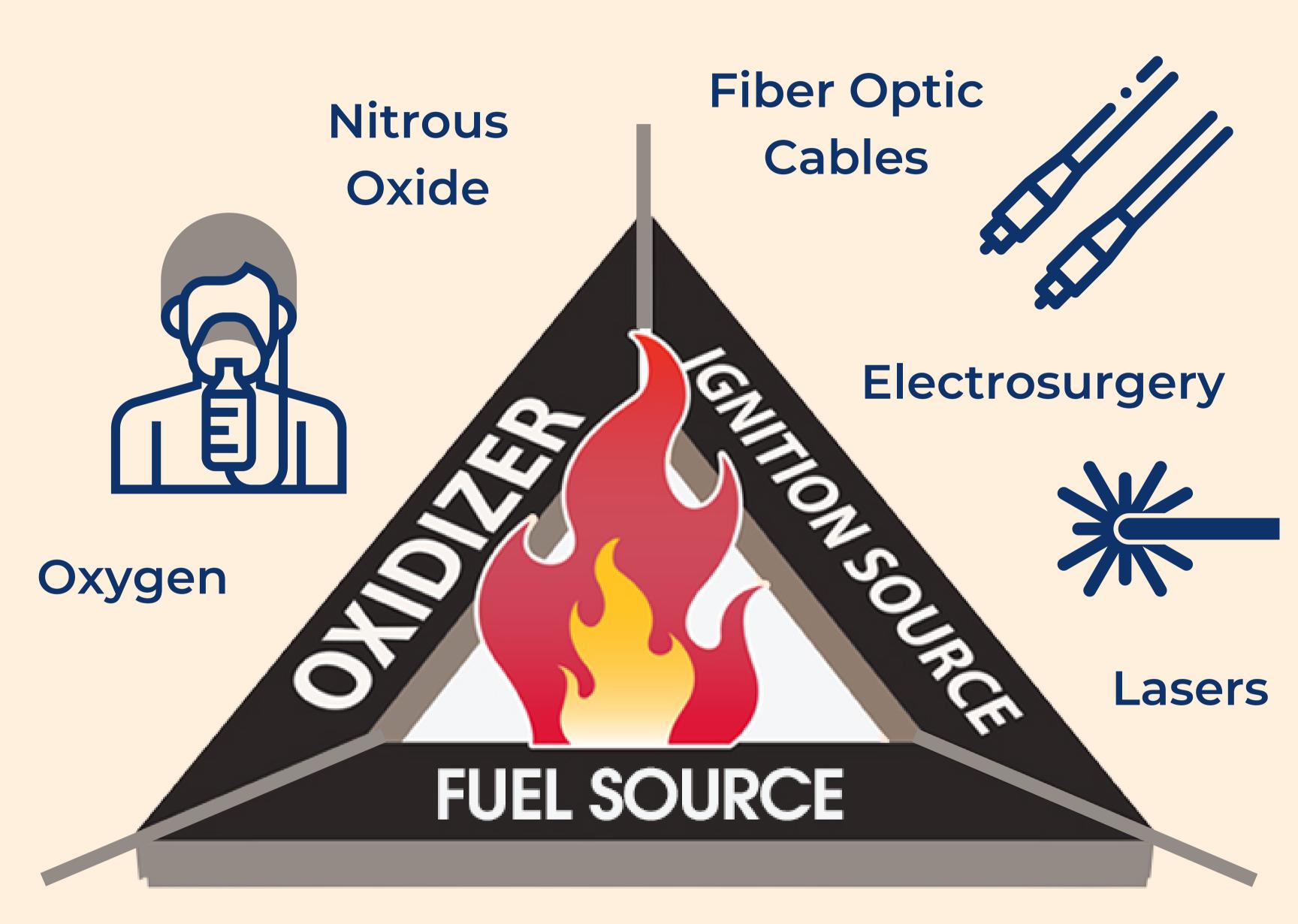
Flammable Prep Solutions

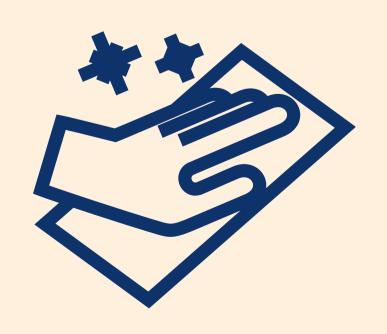






Top Fire Risks in Operating Rooms





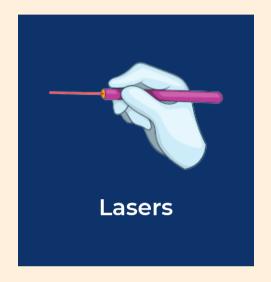
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Top Fire Risks in Operating Rooms











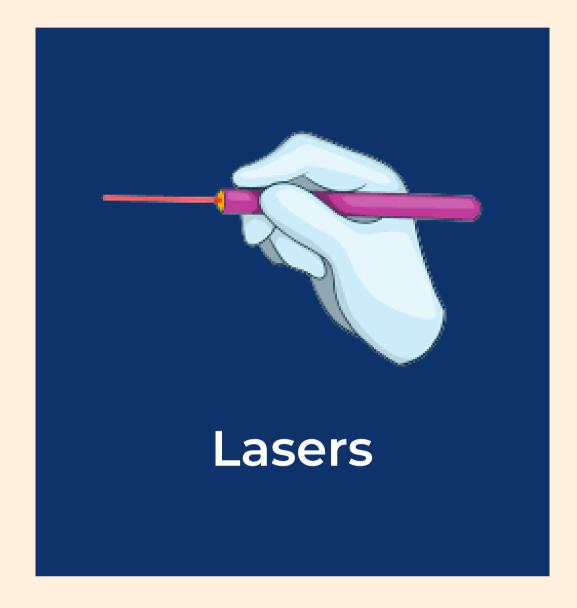


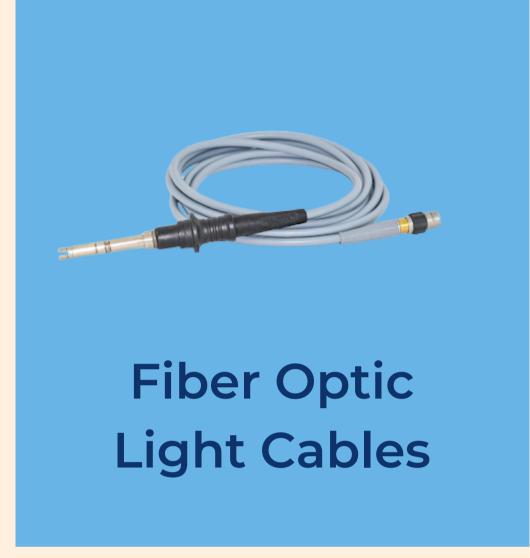
Fire Extinguisher

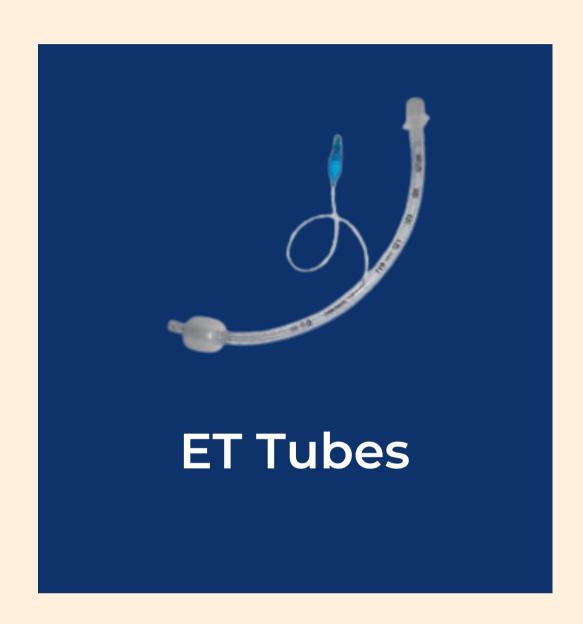
Location:

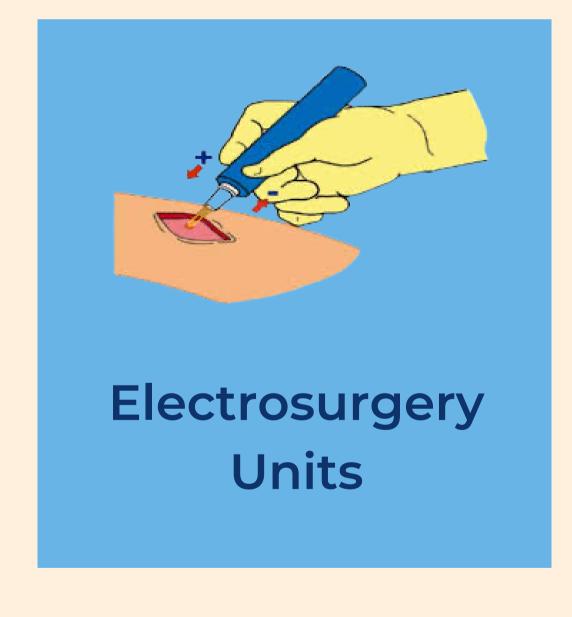


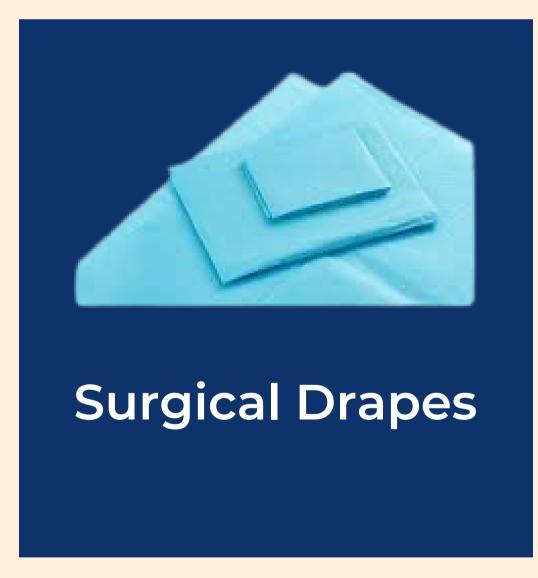
Top Fire Risks in Operating Rooms













Fire Extinguisher

Location:





Fire Safety is Everyone's Responsibility

Do

Don't

Activate the fire alarm when appropriate

Proceed before the TIME OUT

Encourage use of electrosurgical pencil holster

Allow oxygen to pool under drapes

Place light source in standby mode before disconnecting light cables

Use more oxygen than necessary

Place a safety cover on light cables

Rest light cables on drapes

Make sure you know your evacuation plan

Proceed without ample alcohol-based prep drying time (3+ min)

Fire Extinguisher

Location:



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Fire Extinguisher

Location:



TIME OUT!

Everyone's Responsibility on the Road to Zero Harm





The time out is a critical step in surgical safety. A time out should be performed before every operation, following the steps listed here at a minimum.

Fire safety in the operating room is very important due to the hazards present.

Identify all team members by name and role Confirm patient, site, and procedure Identify critical events, duration of operation, anticipated blood loss Identify patient-specific concerns Has antibiotic been given in the last 60 minutes? **Essential imaging displayed?** Has prep solution had time to dry (3 mins)? What is the fire risk and are fire risk mitigation solutions in place? Does everyone in OR know where fire extinguisher is and exit routes in case of fire? ME OUT

(GLOSHIELD

Jackson Medical

Location:

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Fire Extinguisher

Location: