



HEALTH HOLDING

HAFER ALBATIN HEALTH  
CLUSTER  
MATERNITY AND  
CHILDREN HOSPITAL

<b>Department:</b>	Operating Room		
<b>Document:</b>	Departmental Policy and Procedure		
<b>Title:</b>	Duties and Responsibilities of Scrub Nurse		
<b>Applies To:</b>	All Operating Room Nurse		
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## 1. PURPOSE:

- 1.1 To prepare and arrange sterile drapes, instruments and supplies.
- 1.2 To assist the surgeon and assistants throughout the operation by providing the sterile instrument and supplies required.
- 1.3 To maintain patients safety throughout the operation.

## 2. DEFINITIONS:

- 2.1 **Duties and Responsibilities of Scrub Nurse** – a person who is responsible for maintaining the integrity, safety and efficiency of the sterile field throughout the operation.

## 3. POLICY:

- 3.1 All scrub personnel shall safety practice and apply strict aseptic to provide optimum care for the surgical patient.
- 3.2 To confirm surgical procedure according to written consent obtained from patient before any surgical procedure preparation.
- 3.3 To check all surgical instruments, electrical equipment and suction apparatus are functioning before use.
- 3.4 A surgical hand scrub must be performed as per standard of practice before carry out surgical procedures.
- 3.5 The universal precaution standards of practice must be complied at all times.
- 3.6 A sterile gown and gloves must be donned according to aseptic technique according to the requirements of surgical procedures.
- 3.7 All instruments and surgical procedures supplies are assembled according to surgeon's preference and the requirements of surgical procedure.
- 3.8 All scrub personnel shall perform surgical count as per standard of practice.
- 3.9 Anticipate surgeon's requirement and keep one step ahead of surgeon in passing instruments, sutures, sponges and receiving specimen throughout surgical procedure.
- 3.10 Plan, organize and maintain neatness and tidiness of instruments in the sterile working area, mayo tray and trolley.
- 3.11 Patient's safety is to be observed at all times by not placing too many instrument or any heavy instruments on the patients.
- 3.12 All medication or drugs that are required in the procedures must be checked for correct drug dosages and expiry date with the Circulating personnel prior to use.
- 3.13 All specimens must be handled correctly and confirmed with surgeon as per standard practice.
- 3.14 Aseptic technique must be maintained strictly throughout the surgical procedure.

## 4. PROCEDURE:

- 4.1 Confirm the type of surgery according to OR list prior to induction of patient. To check for correct booking of case.
- 4.2 Assess for the following:



- 4.2.1 Correct patient with written consent according to type of surgery.
- 4.2.2 Patient's history of any allergies.
- 4.2.3 Correct preparation of patient according to documentation of patient's OR checklist.
- 4.2.4 Functioning of electrical surgical unit, suction machine and other necessary machine/equipment that may require.
- 4.3 Prepare for the completeness of materials and equipment according to required surgery and surgeon preference.
- 4.4 Perform surgical hand scrub as per standard practice.
- 4.5 Don a sterile gown and gloves according to aseptic practice.
- 4.6 Open the inner sterile set and assemble the sterile instrument and accessory sterile items on mayo tray and trolley according to standard practices.
- 4.7 Receive all the remaining instruments and supplies from the circulator.
- 4.8 Perform surgical count with the circulator personnel, as per standard practice. Check the count board for correction of count.
- 4.9 Assemble the surgical blade (scalpel blade) to the correct scalpel handle using needle holder.
- 4.10 Prepare suture according to surgeon preference.
- 4.11 Gown and gloves surgeon if necessary.
- 4.12 Assist in draping procedure aseptically as per standard of practice.
- 4.13 Secure drape, suctioning and electrosurgical cord with towel clips and drape the end part to circulator.
- 4.14 Bring mayo stand into position over the patient after draping is completed.
- 4.15 Ensure the mayo tray is not resting directly on the patient.
- 4.16 Check and test the electrosurgical unit, suction machine or other electrical equipment if any is well connected and functioning.
- 4.17 Place the electro surgical unit pin in the quiver or its container when not in use.
- 4.18 Pass instruments to surgeon in a firm, decisive, proper position and safe manner.
- 4.19 Pass the skin knife away from the surgeon in the kidney dish. Do not pass the scalpel to hand directly. This is to avoid injury to scrub nurse or surgeon.
- 4.20 Place the skin knife away from the sterile working field. The skin knife is considered contaminated.
- 4.21 Pass ringed instrument in a working position.
- 4.22 Retract tissue gently if required.
- 4.23 Mount the tape or ligatures using an appropriate size artery forceps when required.
- 4.24 Remove artery tips as directed by surgeon and gently releasing the artery grip when the ligature begins to ligate the bleeder's tissue.
- 4.25 Cut suture with tip of stitch scissors as directed by surgeon.
- 4.26 Assist in tissue coagulating by pressing the Electrosurgical Controls according to surgeon's preference.
- 4.27 Clean the electrosurgical tip free from eschar before handling to surgeon.
- 4.28 Assist surgeon in suturing.
- 4.29 Attach each needle  $\frac{1}{4}$  of the curve from eye onto a needle holder and close firmly.
- 4.30 Pass the needle holder and suture materials.
- 4.31 Anticipate surgeon's requirements throughout the procedure. Keep one step, ahead of surgeon in passing instruments, sponges and handling specimen.
- 4.32 Identify all specimens with the surgeon and handles surgical specimen according to standard practice.
- 4.33 Maintain the neat and orderly sterile field of operative field mayo tray and instrument trolley at all times.
- 4.34 Maintain strict aseptic technique and watch for any break in the technique throughout the procedure.
  - 4.34.1 Remove all contaminated used instrument and pass to circulator as standard of practice (e.g. Bowel Surgery).
  - 4.34.2 Acknowledge if sterile field contaminated and re-established sterility.
  - 4.34.3 Change gloves at once if contaminated.
  - 4.34.4 Discard a piece of suture materials, tubing or sponge if falls over edge of the sterile field without touching the contamination area.
  - 4.34.5 Keep hands at table levels when at rest.
  - 4.34.6 Keep contact to sterile field to a minimum and do not lean on the sterile trolley, mayo stand or on the patient.



- 4.34.7 Use forceps to take any contents from the sterile packages.
- 4.34.8 Leave a wide margin of safety in moving about the operating room if necessary and within the sterile field.
- 4.34.9 Sterile person face a sterile area when changing position.
- 4.34.10 Keep the sterile field as dry as possible to prevent strike through.
- 4.34.11 Discard soiled sponges from the sterile field immediately to avoid accumulation.
- 4.34.12 Keep talking to a minimum. Turn face away from sterile field if coughing or sneezing.
- 4.34.13 Wipe instrument with wet sponge to keep clean from blood and debris.
- 4.35 Clear off the operative field and mayo tray as time permits.
- 4.36 Perform 2<sup>nd</sup> surgical count sponges, sharps and instruments with circulating nurse when surgeon begins closure of any open cavity.
- 4.37 Perform final count of sponges, sharps and instruments with circulating nurse when surgeons starts the wound closure.
- 4.38 Connect drainage equipment if used on completion of surgical procedures.
- 4.39 Apply dressing to the surgical wound by non – touch technique.
- 4.40 Assist in removing the drapes from the patient.
- 4.41 Dispose of sharps in sharp container.
- 4.42 Tidy used trolley and throw rubbish into appropriate bags.
- 4.43 Separate sharps and fine instruments from heavy instruments and place them neatly on trolley.
- 4.44 Cover the soiled instrument before sending to CSSD.
- 4.45 Remove gown and gloves as per standard practice.
- 4.46 Wash hand immediately after removing gloves.
- 4.47 Complete and check documentation of the perioperative care plan, record and sign surgical count sheet.

## **5. MATERIALS AND EQUIPMENT:**

- 5.1 Sterile Gown and Gloves
- 5.2 Sterile Set on a trolley
- 5.3 Sterile Drape and Mayo Tray
- 5.4 Sterile Basin as Required

## **6. RESPONSIBILITIES:**

- 6.1 Nurse
- 6.2 Head Nurse



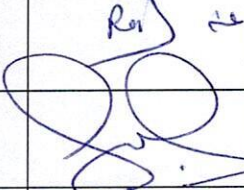
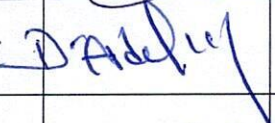
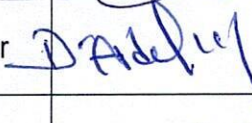

## **7. APPENDICES:**

N/A

## **8. REFERENCES:**

- 8.1 Kingdom of Saudi Arabia, Ministry of Health, Bisha General Hospital, 2018.

## 9. APPROVALS:

	Name	Title	Signature	Date
Prepared by:	Ms. Naimah Naif Al-Salem	Head Nurse of the Operating Room		January 05, 2025
Reviewed by:	Dr. Abdulghani Ibrahim	Head of the Operating Room Department		January 08, 2025
Reviewed by:	Mr. Sabah Turayhib Al - Harbi	Director of Nursing		January 08, 2025
Reviewed by:	Mr. Abdulelah Ayed Al Mutairi	QM&PS Director		January 12, 2025
Reviewed by:	Dr. Tamer Mohamed Naguib	Medical Director		January 12, 2025
Approved by:	Mr. Fahad Hazam Al - Shammari	Hospital Director		January 19, 2025