



HEALTH HOLDING

HAFER ALBATIN HEALTH  
CLUSTER  
MATERNITY AND  
CHILDREN HOSPITAL

<b>Department:</b>	Operating Room		
<b>Document:</b>	Internal Policy and Procedure		
<b>Title:</b>	Draping Patient Before Surgery		
<b>Applies To:</b>	All Surgeon and Operating Room Nurse		
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## 1. PURPOSE:

- 1.1 To provide effective barrier between the surgical wound and the surrounding unsterile environment.
- 1.2 To eliminate and minimize passage of microorganisms between sterile and unsterile area.
- 1.3 Create and maintain adequate sterile field during operation.

## 2. DEFINITIONS:

- 2.1 **Draping Patient Before Surgery** – it is the procedure of covering patient and surrounding areas with a sterile barrier to create and maintain an adequate sterile field during operation.

## 3. POLICY:

- 3.1 Patients must be draped according to the surgical procedure in preparation for surgery.
- 3.2 During draping procedure, the circulating nurse should stand by to direct scrub nurse as necessary and to watch carefully for breaks in aseptic technique.
- 3.3 All surgical scrub team and circulating nurse must be familiar with the types of drapes used in surgery and the draping procedure must be done correctly to maintain sterility.
- 3.4 Disposable drapes should be used for all infectious cases.
- 3.5 Reusable drapes must be checked for integrity and laundered before sterilization.
- 3.6 There must be sufficient space and time for draping to permit correct application.
- 3.7 The drapes must be handled as little as possible. Avoid shaking drapes at all times.
- 3.8 Discard drapes if sterility is in doubt or when contaminated. Do not handle a contaminated drape further; discard if without contaminating gloves or other items.
- 3.9 The skin preparation solution must be dried before commencement of draping.
- 3.10 Commence the drape by first creating the sterile area for the surgical team. Drape from the operative site to peripheral, cover the near side of unsterile surface with drape to protect the sterility of gown and personnel. Never reach across the operating table to drape the opposite side.
- 3.11 During draping protect gloved hands by cuffing end of sheet over them. Do not let gloved hands touch skin of patient. In unfolding a sheet from the operative site toward foot or head of table, protect gloved hand by enclosing it in turned – back cuff of sheet provided for this purpose. Keep hands at table level.
- 3.12 Do not reposition once a towel clip has been through a drape. The tip of towel clip is considered unsterile. The towel clip is only removed if absolutely necessary; discard it from sterile setups without touching points.
- 3.13 If a hole is found in a drape after it is laid down, the hole must be covered with another piece of draping material or the entire drape discarded.
- 3.14 Drapes must always have adequate coverage to create a sterile field. It must cover entire patient, operating table, the foot of patient and anaesthesia shield. Only the incision site is not covered.
- 3.15 If a tear or hole is found on drape material after it is been laid down, the hole must be covered with another piece of sterile drape or entire drape discarded and re – drape.
- 3.16 If hair is found on the drape, remove the entire drape. Hair can cause foreign body tissue reaction in patient if it gets to the wound.

- 3.17 The top of draped table is considered sterile. Any part of drape falls below the table surface is considered unsterile. The drape sheet must not touch the floor.
- 3.18 Equipment that is brought into sterile field but cannot be sterilized must be draped before it is handled by sterile team members.

#### 4. PROCEDURE:

- 4.1 Abdominal Surgery:
  - 4.1.1 Pass one end of the fan folded drape to the surgeon, supporting the folds, keeping it high and holding it taut until it is opened; lay it down as near as possible to the incision site.
  - 4.1.2 Ensure glove hand is cuffed.
  - 4.1.3 Drape the upper and the lower position in the same manner.
  - 4.1.4 Place folded sheet at both side of the incision area.
  - 4.1.5 Secure each side of the drape with two towel clips ensuring the sharp end of towel clip do not injure patient.
  - 4.1.6 Reinforce the initial drape area at the upper end and lower portion with another drape to add to the thickness of the drape.
  - 4.1.7 Place an adhesive plastic drape over the incision site before and after formal draping (if required).
    - 4.1.7.1 Assist in applying adhesive drapes.
    - 4.1.7.2 Hold the sterile – drape taut with the assistant or surgeon.
    - 4.1.7.3 Peel off the paper backing towards the person who is pulling and hand it off to circulating personnel.
    - 4.1.7.4 Lower the drape to operative site area and position with the adhesive side down.
    - 4.1.7.5 Smooth the adhesive drape if necessary.
    - 4.1.7.6 Avoid contamination of gloves at all times.
- 4.2 Head Surgery:
  - 4.2.1 Place four or two towels under the head or mackintosh and towel.
  - 4.2.2 Wrap one or two sheet around the head and secure. Towel clips are not used if X – rays will be taken during surgery.
  - 4.2.3 Hand one end of a fan folded large sheet to assistant. Holding it tight, unfold and secure it over the head end of operating table below operative area at skin edge of the draping towel.
  - 4.2.4 Place a fenestrated sheet according to surgeon preference.
  - 4.2.5 If a split sheet is used, the tails are placed toward head end of operating table, draped round patient's head, and secured with towel clips.
- 4.3 Face surgery:
  - 4.3.1 The exposure of entire face will depend on surgeon's preference. Even if operation is unilateral, surgeon may want the entire face exposed for comparison of skin lines.
  - 4.3.2 The circulating nurse holdup the patient's head.
  - 4.3.3 Surgeon place a drape under head and the towel is drawn up on each side of face, over forehead or at hairline, and fastened with a clip.
  - 4.3.4 Hand up three or four towels according to surgeon preference to surround the operative site. Fastened with a clip.
  - 4.3.5 Place a medium sheet just below site. This sheet must overlap the one under head.
  - 4.3.6 A fenestrated drape may be placed to complete draping.
  - 4.3.7 If patient is receiving inhalation anesthesia, use a minor sheet instead of a towel on a medium sheet for first drape under head. A minor sheet is large enough to draw up on each side of face and to enclose tubes from contaminating the sterile field.
  - 4.3.8 If operation on face is unilateral, the anesthetist may sit at unaffected side, near patient's head, with anaesthesia screen placed on this side of table.
- 4.4 Eye surgery:
  - 4.4.1 Protect eye with sterile eye – pad before draping patient.
  - 4.4.2 Circulating nurse to holdup the patient's head.
  - 4.4.3 Scrub nurse hand over to surgeon two or three towels according to surgeon preference.

- 4.4.4 Surgeon drape patient: One towel is drawn up around head, exposing only the eyebrow and operative eye, fastened with clip without applying pressure.
- 4.4.5 Hand over to surgeon four towels and towels clips to isolate operative site or give adhering aperture drape according to surgeon preference.
- 4.4.6 Cover patient and remainder of table below operative site with a single sheet.
- 4.4.7 If local anesthesia is used raise drapes off patient's nose and mouth to permit free breathing.
- 4.5 Ear Surgery:
  - 4.5.1 Drape patient as same procedure as face or eye operation, except that only ear is exposed.
  - 4.5.2 Turn head toward unaffected side.
- 4.6 Chest and Breast surgery:
  - 4.6.1 Arm is held up following skin preparation.
  - 4.6.2 Place a minor sheet on arm board, under patient's arm, extending sheet under side of chest and shoulder. The person who has been holding arm lays it on arm board and fastens it with a wrist strap.
  - 4.6.3 Hand up towel clips 5 or 6 as required.
  - 4.6.4 Apply breast sheet so axilla is exposed for anticipated axillary dissection or drape to expose breast only if no axillary dissection.
  - 4.6.5 Arm is held up following skin preparation.
- 4.7 Shoulder surgery:
  - 4.7.1 Arm is held up following skin preparation.
  - 4.7.2 Place towel under arm and shoulder.
  - 4.7.3 Place towel over the chest covering the neck.
  - 4.7.4 Surgeon's outline operation with towels and secure with towel clips.
  - 4.7.5 Surgeon's wrap the arm securing it with a sterile bandage. Sterile member of the team relieves person who has been holding arm.
  - 4.7.6 Cover the rest of the patient including anaesthesia screen with a large sheet.
- 4.8 Elbow surgery:
  - 4.8.1 Arm is held up following skin preparation.
  - 4.8.2 Place towel over arm board.
  - 4.8.3 Surgeon places a towel around lower arm, to limit area of site operation, and secure it with a towel clip.
  - 4.8.4 Pull stockinet over hand or surgeon wrap towel hand with a towel securing it with sterile bandage. The circulating nurse is relieved of holding arm. The arm is laid on arm board.
- 4.9 Perineum: In Lithotomy Position
  - 4.9.1 Scrub over pubic area, down over genitalia and perineum. Discard sponge after going to the anus.
  - 4.9.2 Scrub inner aspect of upper third of both thighs with separate sponge.
  - 4.9.3 Place one towel under the buttocks.
  - 4.9.4 Cover each leg and stirrup with one legging sheet.
  - 4.9.5 Place one large sheet over pubic area towards the abdomen.
- 4.10 Hip Surgery:
  - 4.10.1 Leg is held up following skin preparation.
  - 4.10.2 Place large sheet under the leg up to the buttocks.
  - 4.10.3 Surgeon wrapped foot and leg and secure with sterile bandage.
  - 4.10.4 Surgeons outline the incision area with towels securing it with towel clip or sew it.
  - 4.10.5 Place large sheet above operative area and over anesthesia screen.
  - 4.10.6 Place sterile adhesive drape over incision area and towel according to surgeon's preference.
  - 4.10.7 Place large sheet under the leg up to the buttocks.
- 4.11 Knee Surgery:
  - 4.11.1 Leg is held up following skin preparation.
  - 4.11.2 Place large towel under the leg up to buttocks.
  - 4.11.3 Surgeon limits sterile field above knee by placing towel around the leg and secure with towel clip.
  - 4.11.4 Surgeon wraps the leg with towel securing it with sterile bandage.

- 4.11.5 Place large sheet above the operative area and the patient towards the head.
- 4.12 Lower leg and ankle:
  - 4.12.1 Leg is held up following skin preparation.
  - 4.12.2 Place large sheet under leg.
  - 4.12.3 Surgeon wrapped the leg above area of intended incision and secure with towel clip.
  - 4.12.4 Place large sheet over the patient toward the head of the patient.
- 4.13 Foot Surgery:
  - 4.13.1 Foot is held up following skin preparation.
  - 4.13.2 Place large sheet on table, under foot.
  - 4.13.3 Enclose with stockinet/gloves sterile team relieves person holding the leg.
  - 4.13.4 Place large sheet over the foot toward the head of the patient.

## 5. MATERIALS AND EQUIPMENT:

- 5.1 Sterile Drapes
- 5.2 Sterile Instruments
- 5.3 Sterile Gloves

## 6. RESPONSIBILITIES:

- 6.1 Nurse
- 6.2 Surgeon

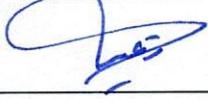
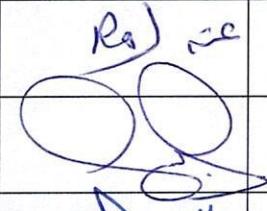
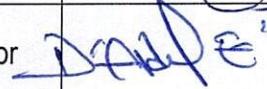
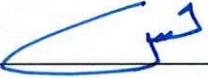
## 7. APPENDICES:

N/A

## 8. REFERENCES:

- 8.1 Routine Procedures for an Operation, Distance Learning for Medical and Nursing Professionals. Retrieved from <https://brooksidepress.org/operations/lessons>.
- 8.2 Kingdom of Saudi Arabia, Ministry of Health, Bisha General Hospital, 2018.

9. APPROVALS:

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