

Tucson Orthopaedic Surgical Center
MONTHLY SAFETY/QUALITY REPORT

	YES	NO	ACTION TAKEN
Spill kits in designated locations			
Formalin			
Blood			
Staff knowledge of spill kit			
Appropriate PPE for BBP in use			
Staff demonstrated knowledge of PPE Next training due:			
Sharps containers emptied when $\frac{3}{4}$ full / proper disposal			
Red bags for all appropriate contaminated waste			
Leak proof bags for all dirty linen			
Clean linen stored separately from dirty			
Clean linen stored covered and not with other items			
Paper towels in holders and available			
Antibact. soap located at each sink			
Alternative hand washing products available throughout facility			
Aseptic technique being followed			
Sterile trays/supplies are stored according to policy			
Autoclave cleaned per procedure			
Autoclave used per policy/procedure			
Biological indicators performed per policy – minimum weekly			
Cleanliness of facility evident			
Operating rooms cleaned between patients following disinfectant manufacturer recommendations.			
Evidence of terminal cleaning being performed daily by housekeeping			
Masks removed at end of case and not worn dangling			
Soiled shoe covers removed prior to leaving surgical area.			
Staff demonstrates proper technique for gowning and gloving			
PACU monitors dust filters cleaned			
	YES	NO	ACTION TAKEN

Nurse Call system functioning and cords are not frayed			
No electrical wires are exposed			
No electrical outlet covers are missing			
All light bulbs are in working order			
All light covers are clean and free from bugs			
All walls are free from holes, or other damage			
Staff can verbalize the location and purpose of MSDS sheets			
MSDS binder is complete (perform spot check on 2 random chemicals)			
1)Chem. Name:			
2)Chem. Name:			
Staff demonstrates knowledge of Exposure Control Plan and location of information.			
Staff verbalizes knowledge of fire evacuation plan			
Staff observed using proper hand hygiene			
Biohazard containers appropriately labeled			
Appropriate handling of Biohazard products in practice by staff.			
Appropriate surgical attire being worn by staff			
Nothing stored within 6" of floor, or 12" of ceiling			
Eyewash station intact and functional			
No eating, drinking, application of cosmetics in patient care areas.			
All exit signs are illuminated			
Nothing that can be damaged by water is being stored under the sinks			
All egress routes are free from obstruction			
All surfaces are clean and free of dust or spills			
All patients charts are being handled with regard to HIPAA rules			
Fire Extinguishers are checked and signed (all 11) place tally marks for each one signed.			*See Evacuation Egress Route Maps for locations of all fire extinguishers
THE FOLLOWING LOGS ARE UP TO DATE			

Crash Cart checked daily			
Mo. Crash Cart hands-on insp. Doc.			
Daily defibrillator strip present			
E-tank O2 cylinder checked daily			
Malignant Hyperthermia			
Latex allergy checked			
Autoclave/ spore culture testing			
Refrigerator Temperature			
Medical Gases			
OR #1			
OR #2			
OR #3			
OR #4			
Anesthesia Cart verification			
OR #1			
OR #2			
OR #3			
OR #4			
CLIA Waived Testing- QC			

Comments:

Inspectors Signature

Date

Source: Tucson (AZ) Orthopaedic Surgery Center.