

Fire: Team Responsibilities in the Perioperative Practice Setting





Goal

The goal of this learning activity is to educate perioperative team members about their roles if a fire occurs in the perioperative practice setting.



Objectives

After completing this activity, the participant will be able to:

- 1. Discuss the roles of the perioperative team members during small fires.
- 2. State roles of the perioperative team members during large fires.
- 3. Identify two actions that each perioperative team member should take during a fire in the perioperative setting.



Topics

- Fire facts
- Locations
- Patient injuries
- Fire reports by procedure
- High-risk procedures
- Fire safety is a team effort

Fire Facts

- Estimated Frequency
 - 200 to 240 per year in the United States
 - 44% head, neck, or upper chest
 - 26% elsewhere on the patient
 - 21% in the airway
 - 8% elsewhere in the patient



Surgical Fires Can Occur: ANYWHERE

- Ambulatory surgery centers
- Hospitals
- Physicians' offices



Patient Injuries

- Of the 200 to 240 OR fires per year in the United States,
 - 20 to 30 are serious and result in disfiguring or disabling injuries.
 - 1 to 2 are fatal.



Surgical Fires Reported by Procedure

- Cervical conization
- Cesarean delivery
- Facial surgery
- Infant surgeries (eg, patent ductus arteriosus)
- Oral surgery
- Pneumonectomy
- Tonsillectomy
- Tracheotomy



High-Risk Procedures

- Surgical procedures performed above the xiphoid process and in the oropharynx carry the greatest risk
 - Lesion removal on the head, neck, or face
 - Tonsillectomy
 - Tracheostomy
 - Burr hole surgery
 - Removal of laryngeal papillomas



Fire Prevention is a Team Effort

- Nurses
- Surgical technologists
- Surgeons
- Assistants
- Environmental Services associates
- Administration team members
- Everyone else not mentioned



Team Responsibilities in a Fire

- Depends on:
 - Facility
 - Time
 - Personnel present
 - Size of the fire
 - Location of the fire



Facility

- Office based
- Small ambulatory surgery center
- Large ambulatory surgery center
- Small hospital
- Large hospital
- Teaching hospital
- University medical center



Time

- Normal business hours
- Evenings
- Weekends
- On-call hours



Personnel Present

- RN circulator
- Scrub person
- Anesthesia professional in the room
- Surgeon
- Supervising anesthesia professional
- Anesthesia assistant
- First assistant (eg, RNFA, surgical assistant)
- Charge RN
- Support personnel
- Administrator



Size and Location of Fire

- Small fire on the patient
- Large fire on the patient
- Fire in the patient
- Airway fire
- Equipment fire



Responsibilities - All Fires

- Alert team members to the presence of a fire.
- Stop the flow of breathing gases to the patient.
- Extinguish the fire by smothering or using water or saline.
- Push the back table away from the sterile field.
- Remove burning material from the patient.
- Assess for secondary fires.
- Assess the patient for injuries.



Responsibilities - All Fires

- Notify appropriate personnel.
- Assign a liaison to the families.
- Act as a liaison to the families.
- Complete an occurrence report.
- Gather involved materials and supplies.



Responsibilities -Large Fire on the Patient

- Perform the responsibilities for <u>All Fires</u>.
- Activate the alarm system.
- Turn off the oxygen shut-off valve outside of the room.
- Extinguish any burning material off of the patient.
- Communicate with personnel in the surrounding areas about the presence of fire.
- Delegate responsibilities for non-direct caregivers.
- Assign a traffic director.
- Show the fire response team or fire department personnel to the location.



Responsibilities - Large Fire on the Patient

- Assist with the decision to evacuate.
- Order the evacuation of perioperative areas.
- Communicate the need to evacuate with personnel in surrounding areas.
- Order evacuation of the unit.
- Compile a list of all people in the perioperative areas.
- Activate the disaster/emergency preparedness plan.



Responsibilities Airway or ET Tube Fire

- Perform the responsibilities for All Fires.
- Disconnect and remove the breathing circuit.
- Discontinue the flow of breathing gases to the patient.
- Remove the ET tube and any segments of the burned tube that remain in the airway.
- Pour water or saline into the airway as directed.
- Examine the airway.
- Re-establish the airway.



Responsibilities - Equipment Fire

- Perform the responsibilities for <u>All Fires</u>.
- Disconnect the equipment from the electrical outlet.
- Remove the working end of the equipment from the sterile field.
- Shut off the electricity to the equipment if you are unable to remove the plug from the outlet.
- Shut off gases to the equipment.
- Assess the size of the fire.
- Determine if equipment can be safely removed from the OR.
- Determine if personnel should evacuate the OR.
- Extinguish the fire using an extinguisher, if appropriate.



Responsibilities - Fire Department

- Internal fire brigade
 - Responsibility varies with location.
- External fire department
 - Should be notified of every perioperative fire.
 - Follow the facility policy and procedures.



Contacting the Fire Department

- Authority having jurisdiction
 - May assist with perioperative education programs
 - Determines types of fire extinguishers
 - Determines location, storage, and amounts of alcohol-based hand scrubs



Summary

Steps for surgical fire prevention:

- 1. Know your role in your facility.
- 2. Know all the roles in your facility.



The End

