

STOP-IQZ. 10 preventive measures to prevent surgical site infections. DECALOGUE OF THE “ZERO SURGICAL SITE INFECTION” PROJECT.



- I** Check the biosecurity conditions in the operating room, temperature, humidity, daily cleaning and between surgical interventions, air ventilation and circulation of healthcare personnel.
- II** Check sterilization of materials, optimal use of protective equipment and cleaning and changing uniforms. Optimize hand hygiene. Develop protocols for changing gloves.
- III** Apply adequate protocols for the patient's body hygiene and change of clothing. Verify compliance. Apply screening programs for multi-resistant microorganisms and selective decontamination screening where applicable.
- IV** Administer antibiotic prophylaxis indicated in the protocols, with a maximum anticipation of 30-60 minutes before the surgical intervention. Evaluate possible allergies or other adverse events of the antibiotic. Adjust dose to weight, hemodilution and renal function. Have a second dose planned if the surgical intervention is too long.
- V** Whenever possible, apply 2% alcoholic chlorhexidine antiseptic to scrub the skin. If possible, use specific applicators. Apply back and forth for 30 seconds, performing friction on horizontal or vertical bands. Do not leave areas without applying the antiseptic. Allow to dry for at least 2 minutes and watch for spills or soaked areas.
- VI** Do not remove hair, unless necessary. If necessary, use a hair clipper and never shaver. After hair removal, perform body bath. If appropriate, standardize chemical hair removal.
- VII** Keep the patient warm before going to the operating room. Continuously, evaluate the body temperature in the operating room with a reliable thermometer. Always maintain patient temperature above 35.5 ° C. Use fluid heaters and contact heaters if necessary. Keep the patient warm in recovery room, after the surgical intervention.
- VIII** Check the patient's blood glucose before going to the operating room. Avoid prolonged fasting state and administer carbohydrate drinks until 2 hours before the surgical intervention, if necessary. Evaluate blood glucose before the surgical intervention, during the surgical intervention (every hour) and after the surgical intervention. Maintain blood glucose levels below 180 mg/dl and use algorithms to dose insulin correctly.
- IX** Correctly apply hospital surgical wound healing protocols: aseptic technique, use of drainage, types of dressings, dressing removal and wound care practices after discharge.
- X** After surgical intervention, survey the appearance of infections or other complications during admission and after discharge. Prioritize the most important surgical interventions and develop risk indicators (infection rates). Compare results between applying “Zero Surgical Infection” Protocol or not. Compare indicators through benchmarking techniques and provide all information to health services to do their own self-assessment.