



The second webinar in the OR Today webinar series was a huge success. More than 100 people registered to attend the 75-minute session presented by Raymond E. Grundman, MSN, MPA, FNP-BC, CASC, Vice President and General Manager, Ambulatory Accreditation Operations at AAAHC.

In his presentation, Grundman addressed issues concerning accreditation compliance. The session included the “Top 10 Actions to Stay Survey-Ready” followed by an informative question-and-answer session. Below we have included a list of the questions posed during the webinar, as well as Grundman’s responses.

Attendee question: Orange allergy stickers should have the date of when the information was taken, correct? We use a Stamp for physicians to update the H&P if it is more than 30 days but less than 90.

Grundman’s response: Orange allergy stickers, if used on the cover of the patient's chart, should include the absence or presence of allergies and untoward reactions to drugs and materials and the date of service.

Attendee question: Does the "no changes" to the H&P apply only to deemed status facilities or is that for all facilities with AAAHC certification?

Grundman’s response: An appropriate and current health history must be completed, with a list of current prescription and non-prescription medications and dosages, when available; physical examination; and pertinent pre-operative diagnostic studies incorporated into the patient's clinical record within 30 days, or according to local, state, or federal requirement, prior to the scheduled surgery/procedure.

Attendee question: Is it acceptable to have staff run c-arm equipment under the supervision of a surgeon who has c-arm privileges or do you need to have a rad tech do it?

Grundman’s response: Health care professionals providing imaging services and/or interpreting results must have appropriate training and credentials, have been granted privileges to provide these services, and have appropriate safety training and provide their services in a safe manner. Please be aware that in some states the operating of an imaging device is restricted to only certain licensed individuals, such as physicians or radiological technicians.

Attendee question: Is it okay for Nurses to push propofol under supervision of anesthesiologist who is doing pain management injection?

Grundman's response: Anesthesia services provided in the facilities owned or operated by the organization are limited to those techniques that are approved by the governing body upon the recommendation of qualified professional personnel. Anesthesia services are performed only by health care professionals who have been credentialed and granted clinical privileges by the organization. Organizations that provide sedative, hypnotic, or analgesic drugs that do not have an antagonist medication (for example, propofol) will identify who in the organization is privileged to administer these drugs.

Attendee question: Who should be a mandatory part of that training?

Grundman's response: We discussed several activities that require periodic staff education and training.

Attendee question: Do you include Hospital Engineers also or not? Regarding biomedical technician who are responsible of the repair of medical equipment?

Grundman's response: If this question is in regards to maintaining records of Inspection, Testing and Maintenance (IMT) for all equipment and devices used in the facility, and these services are provided by a hospital engineering staff, then make sure you maintain a copy of these reports or have immediate access to these reports.

If this question is in regards to who should receive sharps injury prevention education and training at the time of hire (orientation) and again at least yearly, it would apply to anyone who works in your facility and has the opportunity to injure themselves - and that would include contracted vendors such as biomedical engineers, after hours housekeepers, medical waste haulers, etc.

Attendee question: What is AAAHC recommending for Ebola screening?

Grundman's response: The Centers for Disease Control (CDC) have developed a checklist for Outpatient/Ambulatory Care Settings that is an excellent resource. You can find this and other Ebola resources at their website, which is www.cdc.gov/vhf/ebola.

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