


# INSPECTION PERFORMANCE FOR OPERATION THEATRE COMPLEX

*By 04/3*  
*4/5*

S.No	CHECK LIST POINTS	DETAIL	COMPLIANCE AND REMARKS
1.	OUTSIDE AREA	<ul style="list-style-type: none"> <li>• INFORMATION BOARD/DIGITAL DISPLAY ON SCROLL</li> <li>• SUFFICIENT WAITING AREA WITH CHAIRS</li> </ul>	
1	SIGNAGES	DEMARCATON OF <ul style="list-style-type: none"> <li>• PROTECTIVE.</li> <li>• CLEAN.</li> <li>• STERILE AND DIRTY ZONE</li> </ul>	
2	INFRASTRUCTURE	<ul style="list-style-type: none"> <li>• PRE &amp; POST OPERATIVE ROOMS</li> <li>• CHANGING ROOMS</li> <li>• OPERATION THEATERS</li> <li>• STORE</li> <li>• AUTOCLAVE ROOM</li> <li>• SLUICE ROOM.</li> <li>• SEPARATE ( EYE &amp; ORTHO) OT.</li> <li>• FAULTY - FLOORING WALLS, LIGHTING,DOORS ETC</li> <li>• HAND WASH AREA ( SCRUB AREA)</li> </ul>	
3	AIR, HUMIDITY CONTROL	AIRCONDITIONING SYSTEM.	
4	MANPOWER	<ul style="list-style-type: none"> <li>• STAFF NURSES</li> <li>• OTA</li> <li>• ANAES. ASSITANTS</li> <li>• CLASS 4</li> <li>• SWEEPERS.</li> <li>• CONTRACTUAL OR REGULAR</li> </ul>	

*Mani Vardh*

5	LOGISTICS	IN EACH OT <ul style="list-style-type: none"> <li>• CEILING OT LIGHT PLUS ADDITIONAL MOBILE OT LIGHT</li> <li>• OT TABLE</li> <li>• SUCTION CENTRAL PLUS ADDITIONAL ELECTRICAL</li> <li>• ELECTRICAL CAUTERY</li> <li>• MULTI PARA MONITERS</li> <li>• ANAESTH. WORK STATION AND BOYLE'S APPARATUS</li> <li>• CENTRAL OXYGEN AND NITROUS SUPPLY PLUS CYLINDERS.</li> <li>• INSTRUMENT/DRESSING TROLLIES, IV STANDS, FOOT REST ETC.</li> <li>• DEFIBRILLATOR AND CRASH CARTS IN OT COMPLEX.</li> </ul>	
6	MEDICATION	<ul style="list-style-type: none"> <li>• ADDITIONAL NEONATAL CARE CENTRE IN GYNAE OT.</li> <li>• LAPROSCOPIC TUBECTOMY SETS.</li> <li>• ADEQUATE QUANTITY OF INSTRUMENTS, LINEN</li> <li>• MEDICINE AND CONSUMABLES.</li> <li>• PROCUREMENT IN OT</li> <li>• STORAGE</li> <li>• HIGH RISK MEDICINES</li> <li>• DISPOSAL OF EXPIRED MEDICINES</li> <li>• REFRIGERATOR</li> </ul>	
7	BIOMEDICAL WASTE	<ul style="list-style-type: none"> <li>• COLOR CODED BINS ANG BAGS</li> <li>• PUNCTURE PROOF CONTAINERS</li> <li>• NEEDLE CUTTERS</li> <li>• NEEDLE DESTROYER</li> </ul>	

*Manjivraj*

8	RECORD	<ul style="list-style-type: none"> <li>MAJOR, MINOR &amp; FPCASES SURGURY REGISTER</li> <li>STOCK REGISTER FOR</li> <li>MEDICINE</li> <li>CONSUMABLES</li> <li>NARCOTICS</li> <li>MEDICAL GASES</li> <li>LINEN.</li> <li>FUMIGATION SCHEDULE</li> <li>OT SAMPLING REGISTER.</li> </ul>	
9	STERILIZATION	<ul style="list-style-type: none"> <li>AUTOCLAVE ROOM</li> <li>AUTOCLAVES</li> <li>WASHING OF INSTRUMENTS.</li> </ul>	
10	CONSENT FORMS	<ul style="list-style-type: none"> <li>FOR SURGURY</li> <li>ANAESTHESIA</li> <li>MINOR PROCEDURES</li> </ul>	
11	FIRE SAFETY	<ul style="list-style-type: none"> <li>GADGETS</li> <li>EMERGENCY FIRE EXIT PLAN</li> </ul>	
12	PHONE CONNECTION	<ul style="list-style-type: none"> <li>INTERNAL LINE</li> <li>EXTERNAL LINE</li> </ul>	

The above said OT Inspection Performa has been prepared for approval from the authorities. If approved the same will be uploaded on the department official website i.e haryanahhealth.nic.in and email to all Directors/CMO's/PMO's for their reference. In the initial three months, the check list will be kept dynamic and any suggestion for addition or deletion of any point will be considered judiciously

*Submitted for approval Please.*

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4/5/16

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