Clinical Updates

Time Out Verification Documentation Updates: Go-Live 6/3/25

➢ 4 new fields have been added to the iView documentation to future capture specifics regarding the time out verification.
  - Briefing/Anesthesia Timeout Completed
  - Procedure Timeout Complete at
  - Site Blocked
  - Debriefing Completed

**Site Blocked is not a required field. This field contains 200 options for site selection. If NO block is used, clinicians should choose the "other" option and input "None"
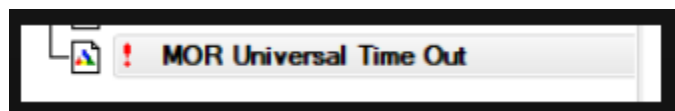
View of changes in I-View

Time Out Verification	☑
Procedure Performed	Test
*Correct Patient Verified By Name/DOB/MRN	◇
*Correct Procedure	◇
*Accurate and Complete Consent Form	◇
*Briefing/Anesthesia Timeout Completed	◇
*Procedure Timeout Complete at	◇
*Confirm Correct Side/Site & Site Marked	◇
Site Blocked	
*Correct Patient Position	◇
*Mark Remains Visible	◇
*Availability of Special Equip/Supplies	◇
*Preop Antibiotic Given	◇
Time Antibiotic Started	◇
*Is this a Central Line Insertion?	◇
*Personnel Present and In Agreement	◇
Personnel #2 Present and In Agreement	◇
Personnel #3 Present and In Agreement	◇
Personnel #4 Present and In Agreement	◇
Other Personnel Present and In Agreement	◇
*Debriefing Completed	◇
Additional Comments	

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View of changes in Power Form

Time Out Verification

**If there are any discrepancies during the final verification process, STOP and RESOLVE.
DO NOT START THE PROCEDURE UNTIL THE TIME OUT PROCESS IS COMPLETED.**

Procedure Performed

| |

Correct Patient Verified By Name/DOB/MRN

○ Yes

Correct Procedure

○ Yes   ○ N/A

Accurate and Complete Consent Form

○ Yes
○ N/A

Briefing/Anesthesia Timeout Completed

○ Yes   ○ N/A
○ No

Procedure Timeout Completed at

xx /xx /xxxx ▲▼ ∨ [   ] ▲▼

Site Blocked

☐ Abdomen
☐ Abdomen Left Lower Quad
☐ Abdomen Left Upper Quad
☐ Abdomen Right Lower Quad
☐ Abdomen Right Upper Quad
☐ Achilles Bilateral
☐ Achilles right
☐ Achilles Left
☐ Ankle Left
☐ Ankle Right
☐ Ankles Bilateral
☐ Anus
☐ Arm Left

☐ Arm Left Lower
☐ Arm Left Upper
☐ Arm Right
☐ Arm Right Lower
☐ Arm Right Upper
☐ Arms Bilateral
☐ Axilla Bilateral
☐ Axilla Left
☐ Axilla Right
☐ Back
☐ Back Left Lower
☐ Back Left Middle
☐ Back Left Upper

☐ Back Lower
☐ Back Middle
☐ Back Right Lower
☐ Back Right Upper
☐ Back Upper
☐ Breast Left
☐ Breast Right
☐ Breasts Bilateral
☐ Buttock Bilateral
☐ Buttock Left
☐ Buttock Right
☐ Calf Left
☐ Calf Right

☐ Calves Bilateral
☐ Cervix
☐ Cheek Left
☐ Cheek Right
☐ Cheeks Bilateral
☐ Chest
☐ Chest Left
☐ Chest Midline
☐ Chest Right
☐ Chin
☐ Clavicle Bilateral
☐ Clavicle Left
☐ Clavicle Right

☐ Coccyx
☐ Ear Left
☐ Ear Right
☐ Ears Bilateral
☐ Elbow Left
☐ Elbow Right
☐ Elbows Bilateral
☐ Eye Left
☐ Eye Right
☐ Eyelid Left
☐ Eyelid Left Lower
☐ Eyelid Left Upper
☐ Eyelid Right

☐ Eye
☐ Eye
☐ Eye
☐ Eye
☐ Eye
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☐ Fing

Confirm Correct Side/Site & Site Marked

○ Yes   ○ Alternate
○ N/A

Correct Patient Position

○ Yes
○ N/A

Mark Remains Visible

○ Yes
○ N/A

Availability of Special Equip/Supplies

○ Yes
○ N/A
○ Yes, Speech Probes/Scopes

Preop Antibiotic Given

○ Yes
○ N/A

Time Antibiotic Started

xx /xx /xxxx ▲▼ ∨ [   ] ▲▼

Is this a Central Line Insertion?

○ Yes, elective   ○ No
○ Yes, emergent

Personnel present during Time Out and in agreement on the procedure to be done:

1 [   ] 🔍   2 [   ] 🔍   **ENTER LAST AND FIRST NAME(S)**

3 [   ] 🔍   4 [   ] 🔍

Other Personnel present during Time Out and in agreement on the procedure to be done

[   ]   **ENTER FIRST AND LAST NAME(S)**

Debriefing Completed

○ Yes
○ No
○ N/A

Additional Comments

[   ]

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View of changes in Surginet: Timeout Verification will be updated to align to only 5 core fields


Removal of "Wound Care Provided By" under Tubes and Wounds: Go-live 6/9/25

➢ Wound care provided by is currently listed with specific providers, but it does not accurately reflect who provides the care. Additionally, this information is documented elsewhere.

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H U D D L E C A R D

Mission Hospital: New Rehab Product- Walking Harness

❑ The acute rehab department at Mission Hospital now has access to walking harnesses.

❑ Physical and occupational therapy will determine patient appropriateness for use of this product.

❑ Nursing staff should **NOT** attempt to use this product with patients.

❑ Walking harnesses are **NOT** an appropriate substitute for a transfer sling.

❑ Walking harnesses are reusable and need to be laundered between patients. If a walking harness is found, please contact the rehab department at 828-213-8660.

Updated: 6/2/25

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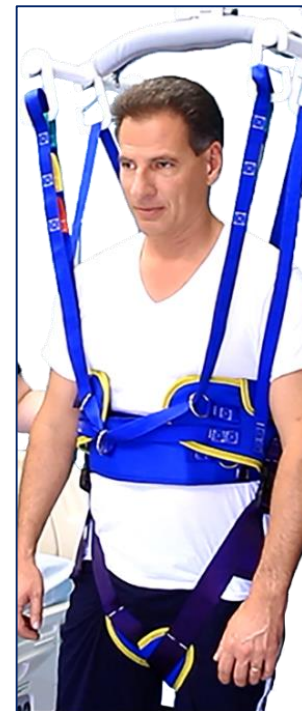
Post Fall Debrief Form - VSS

Post Fall Debrief Form: Why?

We have incorporated post fall debrief questions in VigiLanz Safety Surveillance (VSS) to help gather contributing factors and better understand reasons behind patient falls. This will allow our facility or center leaders to more easily detect trends and patterns with falls and improve fall prevention strategies.

Post Fall Debrief Form: When to Use?

After a fall has occurred (witnessed or unwitnessed):
- Conduct the post fall debrief on the unit
- Enter a Fall Event in VSS and complete the **post fall debrief fields**

This standardized process should be followed for all patient falls in hospitals, FSEDs, and ambulatory surgery centers.
- The post fall debrief fields are protected and should not be duplicated nor referenced in the medical record.
- Facilities and centers should transition to using only the Post Fall Debrief in VSS; this will replace all other methods including paper and electronic formats.

Post Fall Debrief Form: How to Complete?

1. Under the 'Report' tab, click 'Patient Event' then 'Fall'

2. Select the correct facility or center where the event occurred.

3. To populate the Post Fall Debrief fields, the Reporter must answer 'Yes' to the question "Was a post fall debrief form completed?":

> **✱** Was a post fall debrief form completed? (Answer 'Yes' to populate post fall debrief questions)
>
> Yes ▼

4. Complete all the new fields that display when the above question is answered "Yes":

> **✱** Was a post fall debrief form completed? (Answer 'Yes' to populate post fall debrief questions)
>
> Yes ▼
>
> **✱** What was the number of staff required to assist patient? (baseline)
>
> [   ]
>
> **✱** Was patient being assisted at the time of fall?
>
> [▼   ]
>
> **✱** Did the patient use call light prior to fall?   **✱** Time of last safety round?
>
> [▼   ]   [   ]

Post Fall Debrief Form: What Types of Questions?

Example Questions on the Fall Debrief Form

Reporter Section	Investigator Section
Was patient being assisted at time of fall?	What was the fall risk level?
Did the patient use call light prior to fall?	Was the bed alarm on at the time of the fall?
Time of last safety round?	Were there any unusual circumstances on the unit/in the department around the time of the fall?
What care was provided at last safety round?	Was the fall preventable?
Did the patient have a Patient Safety Attendant?	Was the fall intentional?
Was a discharge order in place prior to the fall?	What was the cause of the fall?

Transporting Patients on Telemetry

When a patient is being transported off the unit, it is essential to notify the CMU of the patient's destination.

❑ **Always contact the CMU before the patient leaves the floor for any reason.** Notify them of the patient's destination and call again when the patient returns to the unit.

❑ **Responsibilities of the Primary Nurse for Telemetry-Monitored Patients Being Transported Off-Unit:**

1. **Know the patient's destination.**

2. **Notify the CMU** of where the patient is going. Use closed-loop communication by having the CMU technician repeat the location to confirm understanding.

3. **CMU will notify primary nurse if an event occurs. Primary nurse will notify the department where the patient is located** that the patient is having an event and to check the patient, and then primary nurse should respond to off unit location to assess the patient.

   a. For example, patient has an event in MRI. CMU calls primary nurse. Primary nurse notifies MRI via iMobile to check the patient and activate rapid response/code blue as needed. Then primary nurse goes to MRI to assess the patient.

4. **Notify the CMU** when the patient returns to the unit.

Physiologic Monitoring: Cardiac Telemetry Monitoring, Continuous Pulse Oximetry Monitoring, Non-Invasive Blood Pressure Monitoring (1PC.NRS.001)

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Updated: 06/2/25

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