

Iowa Colorectal Surgery Bundle

Pre-Operative

1. Hibiclens (CHG)

Shower

- Inpatients /outpatients will shower with CHG two times preop

2. Oral decontamination and mechanical

bowel prep

3. Prophylactic IV

Antibiotics

- Use Ertapenem 1 gm IV once
OR
Cefotetan 2 gm IV once
If pt >120 Kg, use 3 gm

If allergic to beta-lactam and carbapenem:

- Ciprofloxacin 400 mg IV + metronidazole 500 mg IV
If patient is receiving IV antibiotics for treatment give a pre-incision dose of the treatment antibiotic if the last dose was administered more than 1 hour prior (e.g., pip/tazo)

4. Active Warming

Process

- If temp in DOSA is < 36.0 a Bair Hugger is placed
- OR Room temperature is > 72 degrees
- Turn Bair Hugger on before induction of anesthesia

5. Clipping Hair in DOSA

6. Obtain baseline Na, K, Cl, glucose and T&S

Intra-Operative

1. Complete Surgical Safety Checklist

2. Antibiotics

- Redose cefotetan or treatment antibiotics if surgery is longer than 6 hours

3. CHG Skin Prep

- Always use Chloraprep or Duraprep
- Except: Betadine for permanent stoma, open wound, genital areas

4. Wound Protector Preferred

- Proven to decrease risk of wound infection and maintain moisture at the incision site

5. Hand Hygiene Compliance

- Wash hands with soap and water after de-gowning /degloving

6. Use separated closing tray and change gown and gloves

7. Re-check glucose for pts. If preop glucose > 200 or diabetic protocol

8. Circulator RN and Surgeon collaborate and call for count just before skin closure

9. Limit OR Door Openings to < 10/hr

Post-Operative

1. Sterile Wound Care

- a. if soiled within 48 hrs
- b. after 48 hours – Chloraprep every day and probe areas that are draining

2. Continue glucose monitoring for patients if preop glucose > 200 or diabetic protocol

3. Pt. education on early identification of wound complications