

**STUDENT HEALTH SERVICES
Policies and Procedures**

SURGICAL AND ANESTHESIA SERVICES

SURGICAL SERVICES

I. PURPOSE

To provide to students minor elective surgical procedures at minimal or no cost.

II. OBJECTIVES

To assure that the surgical services offered by the Student Health Services are performed in a safe and sanitary environment by qualified practitioners.

III. RESPONSIBILITY AND AUTHORITY

Surgical services are the responsibility of the Lead Physician as delegated by the Director.

IV. ADMINISTRATION OF POLICY

A. Surgical procedures performed in the Student Health Services are limited to those procedures that are approved by the governing body and include:

1. Elective surgery performed in the Student Health Services will be limited to those minor procedures which may be needed for diagnostic completeness and which are superficial in nature; e.g. mole biopsy, colposcopy including biopsy, needle aspirations, incision and drainage of cysts and abscesses, and toenail excisions.
2. Surgeries such as circumcisions, hymenectomies, scar revisions and lymph node biopsies should not be done in Student Health Services but referred to an appropriate physician or facility.
3. Surgery on the face or on the skin over the breast and other excisional biopsies should be done with thought to scar formation and resultant disfigurement. Only the most superficial nevus on the breast should be excised by those approved for elective surgery.
4. Surgical repair of lacerations not located in an area that would cause a cosmetically significant scar or disfigurement may be done. If lacerations involve underlying nerve(s) or tendon(s), appropriate referral to a local physician or facility should be made.

- B. Surgical procedures are performed only by health care practitioners who are licensed to perform such procedures in California and are trained to do the procedures indicated on the clinician's "privileges" list. Reason, as well as the standards of medical care, dictate that a surgeon should have training in any procedure that he/she does and should have training in recognizing and managing any complications that may arise.
- C. Surgical procedures to be performed in the Student Health Services are reviewed periodically as part of the peer review component of the Quality Management and Improvement program.
- D. An appropriate and current history, physical examination and pertinent diagnostic studies are incorporated into the patient's medical record prior to the procedure.
- E. The appropriateness of the proposed surgical procedure has been discussed with the patient prior to the surgery and this is documented in the patient's chart.
- F. The informed consent of the patient or, if a minor, of the patient's representative are obtained before surgery is performed. A list of possible complications is included on the surgery consent form.
- G. Registered nurses and other personnel assisting in the provision of surgical services are appropriately trained and supervised.
- H. All tissues for excisional biopsy are sent out for histological diagnosis by a pathologist except excised nails and skin tags. Foreign bodies that are surgically removed will not be sent for histological evaluation.
 - 1. The histological report signed by the pathologist is made a part of the patient's medical record.
 - 2. The operating physician will initial the pathologist's report before it is filed in the chart.
- I. The findings and techniques of the surgery are accurately and completely written or dictated immediately after the procedure by the practitioner who performed the surgery. This is then available for continuity of care and becomes a part of the patient's medical record.
- J. Adequate safeguards to protect the patient from cross-infection are assured through the provision of adequate space, equipment and personnel, and include the following:
 - 1. All persons entering surgical area are properly attired.
 - 2. Acceptable aseptic techniques are used by all persons in the surgical area.

3. Only authorized persons are allowed in the surgical area.
 4. Suitable equipment for rapid and routine sterilization is available to assure that surgical materials are sterile.
 5. Sterilized materials are packaged and labeled in a consistent manner to maintain sterility and identify sterility dates.
 6. Environmental controls are implemented to assure a safe and sanitary environment.
 7. Suitable equipment and supplies are provided for the regular cleaning of all interior surfaces.
 8. Surgery room is appropriately cleaned after each procedure.
- K. Periodic calibration and/or preventive maintenance of equipment are provided.
- L. A procedure has been established for the observation and care of the patient during the preoperative preparation and an adequate postoperative recovery period in the Nursing Policies and Procedures Manual.
- M. Protocols have been established for instructing patients in self-care after surgery, including written instructions to be given to patients on wound care.

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**STUDENT HEALTH SERVICES
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ANESTHESIA SERVICES

I. PURPOSE

To provide anesthesia with local or topical anesthetics to facilitate minor surgical procedures done in Student Health Services.

II. RESPONSIBILITY AND AUTHORITY

Anesthesia services are the responsibility of the Lead Physician as delegated by the Director.

III. ADMINISTRATION OF POLICY

A. Local and topical anesthetics will be administered by physicians whose "Privilege Lists" includes the surgical procedures for which the anesthesia is necessary. The "Privilege Lists" are authorized by the Lead Physician and the Director and kept on file by the Administration.

B. The facility maintains the equipment, supplies and personnel to respond to allergic reactions to local or topical anesthetics.

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