



THEATRE TRACKING BENEFITS OF AN ELECTRONIC CSSD TRACKING SYSTEM

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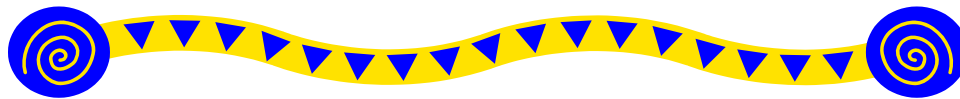
CSSD Manager

Holy Spirit Northside Private Hospital

7th September 2012

DISCLAIMER

- Note: Not here to promote a specific brand as most have the ability achieve degrees of what I am talking about.
- The CSSD Tracking System being utilised at the HSN is Meditrax



OVERVIEW

- Why & Now
- Work Already Done
- Plan
- Cooperation & Agreement
- Implementation
- Review

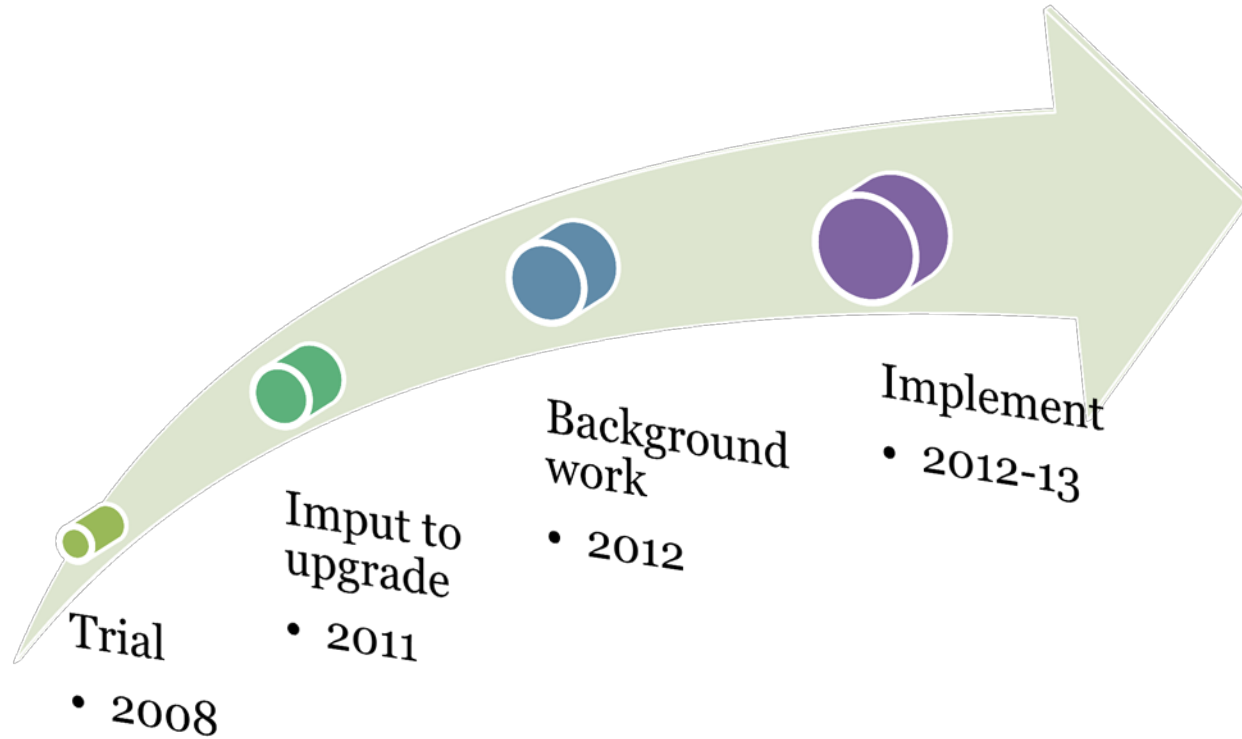


WHY

- Initial installation and budget restrictions left CSSD maintaining the patient tracking capability
- Theatre trial demonstrated scanning will work in OT
- Needs identified of 'would like' over basic record
- Other reviews in OT could be combined with this Tracking System utilization
- Costing estimate & planning
- Implementation
- Evaluate



PLANNING



NEEDS IDENTIFIED

- Reduce non-clinical work (sticky labels)
- Increase Efficiency and Compliance
- Consumerable usage
- Rebatale identification usage
- Prosthetic usage
- Meaningful printouts
- Preference list update
- Transfer scanning to OT
- Ensure compliance (avoid GIGO)
- Information required to allow inter software communication
- Tracking supplier cooperation



WHAT DO YOU NEED



LOGISTICS & COOPERATION

○ Theatre

- Scanner(s)
- PC with Widescreen
(not internet linked)
- Printers
- Education (E Learning)
- Demonstration
- Support

○ Other

- Ideas for use to
Supplier IT to gauge
limitations
- Plan logistics – printer
availability
- Combine with other
moves – tray transfer to
OT shelves
- Prosthetic lists from
suppliers



DOCUMENTATION REQUIREMENTS

- Enter all Consumable codes (Use of Hospital inventory System codes)
- Enter all prosthetics (Use of Prosthetic Supplier Barcodes / Code information)
- Re-Format all VMO Preference lists which will now include barcodes
- Enter all new Locations
- Enter all VMO and Theatre / Cath lab / Endoscopy staff into Tracking System
- Smile a lot to those who have volunteered to make it work



IMPLEMENTATION

- Start selected areas where Preference list have been updated
- Be there to support
- Look for any challenges
- Iron out issues arising so version updates can be more effective



DOCTOR NAME:	Anthony GANKO	GLOVES:	Purple	
ASSISTANT:	M PALMER	7½x2	*20602896*	*20602896*
PROCEDURE:	PATELLECTOMY	8	*20602901*	*20602901*
POSITION:	Supine	8½	*20602908*	*20602908*
PATHOLOGY:				

DRAPES:	Qty	Code	Barcode
General Knee Pack	1	*20645436*	*20645436*
XL Microcool Gown	1	*20609354*	*20609354*
XL Gown	1	*20609322*	*20609322*
Impervious Split Sheet	1	*20625512*	*20625512*

PREP:	Qty	Code	Barcode
Alcohol Chlorhexidine Special Red	1	*000133*	*000133*

INFILTRATION:	Qty	Code	Barcode
Naropin 0.75% 20mls	1	NAR04	NAR04

BLADES:	Qty	Code	Barcode
10	2	*20636945*	*20636945*

SUTURES:	Qty	Code	Barcode
0 Polysorb 914	1	*20614047*	*20614047*
3-0 Monocryl 936	1	*20625061*	*20625061*

STERILE EXTRAS:	Qty	Code	Barcode
1ml syringe	1	*20605513*	*20605513*
Needle Mat	1	*20651129*	*20651129*
Opsite 45x55	1	*20636399*	*20636399*

REBATE ITEMS	Qty	Code	Barcode

DRESSINGS:	Qty	Code	Barcode
Long Comfeel	1	*20610118*	*20610118*

INSTRUMENTS:	Qty
Major Orthopaedic Tray	

ORDERLY REQUIREMENTS
Tourniquet
Lateral support
3lt bag Normal Saline on IV pole

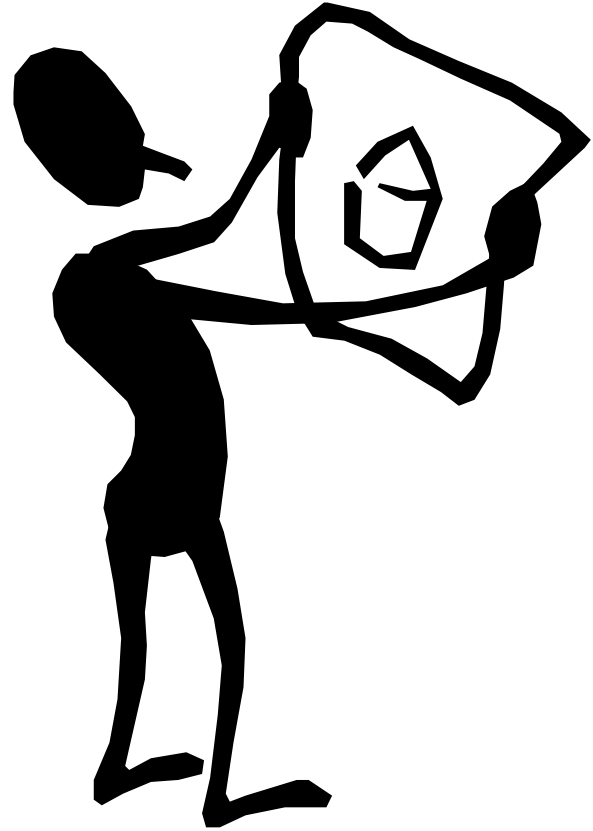
HELPFUL INFORMATION:
Types own notes.
Dialthermy: 40 Coag Standard, 0 Cut.

VMO Signature:	
Date:	
Version:	v1 24082012 ls



SUMMARY - WHERE TO NEXT?

- When is the next milestone?
- What are the expected deliverables?
- Known risks and issues
 - What is the investigation timeline for these issues?
- What are the immediate next steps?



DON'T GET TOO COMFORTABLE TOO SOON!

