

SURGICAL SITE FIRE RISK ASSESSMENT

Alcohol-based prep solution had sufficient time for fumes to dissipate.

Yes No N/A

(Circle appropriate option) **Y** **N**

* Surgical site or incision above the xiphoid	1	0
* Open oxygen source (patient receiving supplemental oxygen via any variety of face mask or nasal cannula)	1	0
* Available ignition source (i.e., electrosurgery unit, laser, defibrillator, burr, fiberoptic light source)	1	0
Total Score		

Scoring:

- 3 ➔ High Risk
- 2 ➔ Low Risk w/ potential to convert to High Risk
- 1 ➔ Low Risk

FIRE RISK PROTOCOLS

Score 3 ➔ High Risk

The circulating nurse and anesthesia provider take these precautions.

Circulating Nurse

- Verifies fire triangle, including verbal confirmation of the oxygen percentage
- Ensure appropriate draping techniques to minimize oxygen concentration under the drapes
- Minimizes ESU setting
- Assesses that enough time has been allowed for fumes of alcohol-based prep solutions to dissipate (minimum of 3 minutes)
- Encourages use of wet sponges
- Ensures a basin of sterile saline and bulb syringe are available for fire suppression

Anesthesia Provider

- Ensures that a syringe full of saline is in reach for procedures conducted within the oral cavity
- Documents oxygen concentrations and flows
- Uses the MAC circuit for oxygen administration initially at FiO₂ of .30 using fresh gas flows of at least 12 L/min.

Score 2 ➔ Low Risk w/ potential to convert to High Risk

Standard fire safety precautions are followed with the potential to convert to high-risk precautions if necessary.

Standard Precautions are to:

- Observe alcohol-based prep drying times (minimum of 3 minutes)
- Protect heat sources (e.g., using the ESU pencil holster)
- Use standard draping procedure

Score 1 ➔ Low Risk

Standard fire safety precautions are followed.

