

Service Priorities and Programmes Electronic Presentations

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Submitting author: Miss L C LAM

Post title: Nursing Officer, Caritas Medical Centre, KWC

Quality Improvement Related to Ophthalmic Lint Found Post-operatively

Lam L C (1)

Operating Theatre, Caritas Medical Centre

Keywords:

Lint found after surgery promote lint-free surgery outcome of present consumable Modified practice in nursing care

Introduction

Information from difference sources revealed that there was inconsistent present of lint in ophthalmic patient post-operatively. The inconsistency may not do harm but result in unnecessary exposure to foreign body in eye. To enhance lint free operation, measurements have been worked out for about 2 years and improvement was observed by different ophthalmic surgeon.

Objectives

Objectives: - To illustrate the theatre's weak area where lint presents in a way that is not acceptable. - To search for the acceptable change in our peri-operative procedure in order to diminish lint adhering in ophthalmic instruments, that may result in bringing into the eye intra-operatively. - To reinforce the gauze and cotton stick's supplier of lint free quality control.

<u>Methodology</u>

Methodology and Comparative Result: Ophthalmic Microscope with magnification of 18 times was used to illustrate the quality of different materials use for ophthalmic surgery. And compared with materials chosen to be use instead: - Instrument Wrapping Cloth vs Non-woven Wrapper were shaken on individual white paper and observed under microscope. And result will be shown in form of photo. - Instruments condition while contacted with lint. - Gauze and Cotton Stick vs Instrument Wiper and Eye Sponge use on the sterile table. - Gauze vs Instrument Wiper soaked in water.

Result

Advance actions taken to improve and promote lint-free surgery: According to the result shown from the microscope, theatre practice has been modified to diminish the lint problem by: - Use Non-woven Wrapper for wrapping all ophthalmic instruments pre-operatively. - Gauze and Cotton Stick should be placed in a container and use as less as possible intra-operatively. - Instrument Wiper was used instead of Gauze to clean the instrument intra-operatively. - Use Non-woven Drape for laying out the sterile surface intra-operatively. - Suppliers of the gauze and cotton stick were contacted for sample comparison and reinforced of the quality control. Conclusions:

The modified practice in theatre for ophthalmic surgery has been promoted for about two years. The concept of lint-free surgery has been greatly improved among our nurses. The condition of post-operative ophthalmic lint has been controlled and improvement was observed.