Hospital Authority Convention 2018

Maintenance of Normothermia during surgery

Pok Oi Hospital
Operating Theatre
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7th May, 2018



Background



Surgical patient are at risk of developing hypothermia at any stage of the perioperative pathway.

Maintenance of Normothermia

reduce the risk of postoperative cardiac events, bleeding, and surgical site infection

What is Normothermia?

- > A core temperature
- > temperature of the internal environment of the body
- > range 36 °C to 37.5 °C

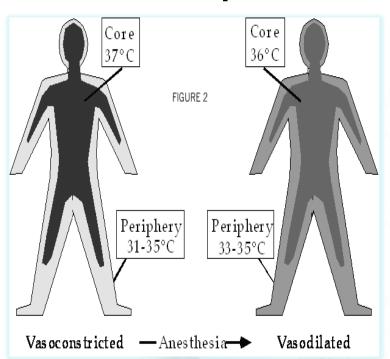


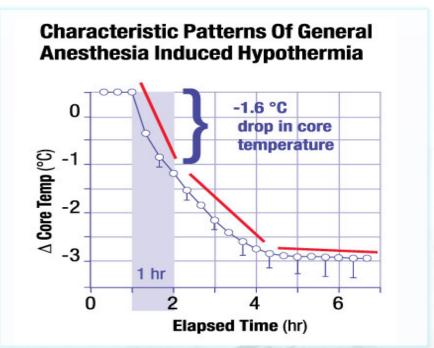


Background

Inadvertent perioperative hypothermia (IPH)

> A Core temperature < 36 °C (NICE,2016)

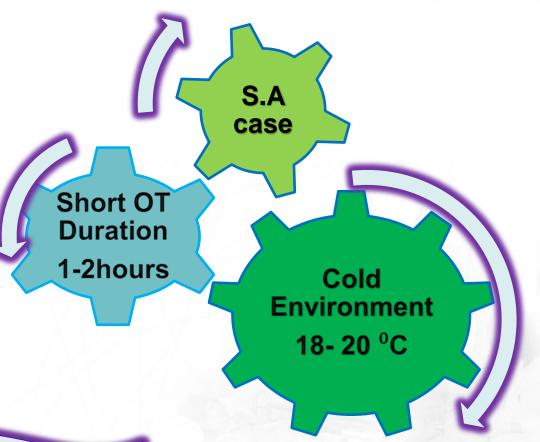




Bayter-Marín , Rubio , Valedón , Macías (2017)



Reasons of hypothermia in POH OT



People First

In 10/15 -3/16
Post-operative hypothermia rate 38.8%





Pre-operative measurement

1. On-call temp by ward nurse

2.Pre-warming to patients in induction room

if Temp <= 36 °C or complain cold High risk group e.g old age patient, urology case, hip case









Pre-operative measurement

- 3. Set theatre temperature between 20°C -22°C
- 4. Monitoring the theatre ambient temperature twice a day







Pre-operative measurement

5. All patients receive a new warm blanket and disposable warming blanket immediately after transferring to OT

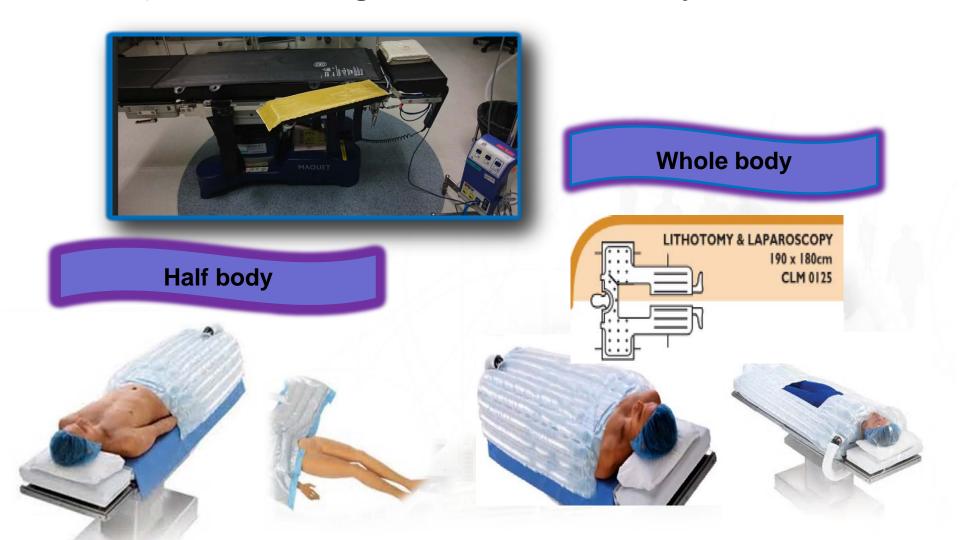






Active warming measure

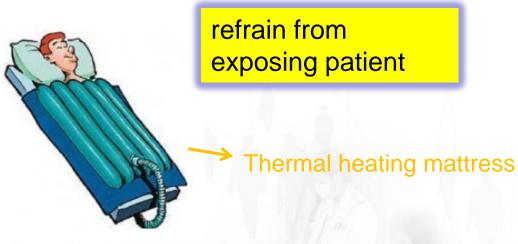
6.Apply Thermal heating mattress and whole body Bair





During Induction

- > Start active warming before induction
- ➤ bair hugger for 5-10 minutes



Why??

- minimized hot loss due to vasodilation by anesthetic agent
- →body's heat from center to outer re- distribution, which is characterized by early and fast



Spinal /Regional Anaesthesia



- Avoid unnecessary body exposure
- Keep patient covered like in Bair Hugger Shielding on turning supine





Intra-operative monitoring

General Anesthesia cases

>Temp probe



SA/RA cases

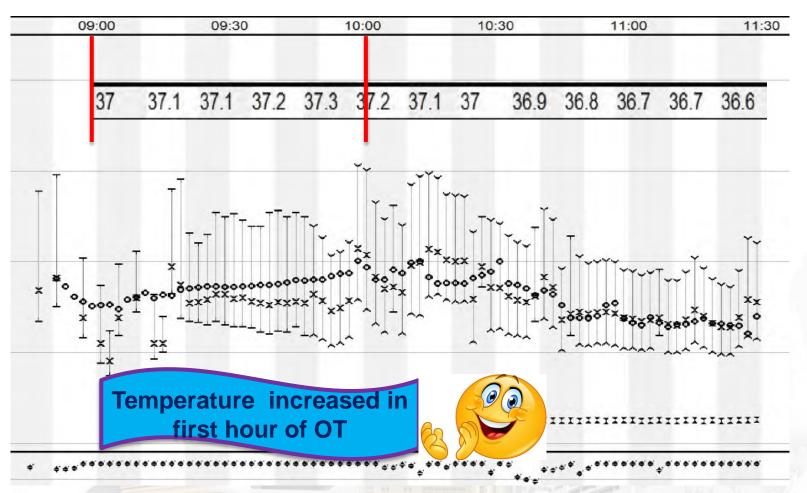
> Tympanic temperature







Result Sharing





People First 以人為本

Post-operative in RR

➤ Recovery Room Temperature keep 24°C

If hypothermic

- ✓ recheck at another ear,
- ✓ change machine
- ✓ change operator



- provide active warming immediately
- Recheck temperature later
- report to Anesthetist I/C and record





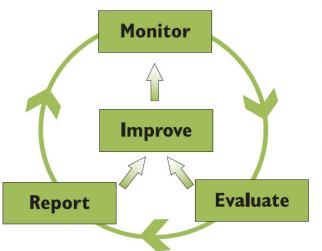
Education and on going monitoring

> Staff education

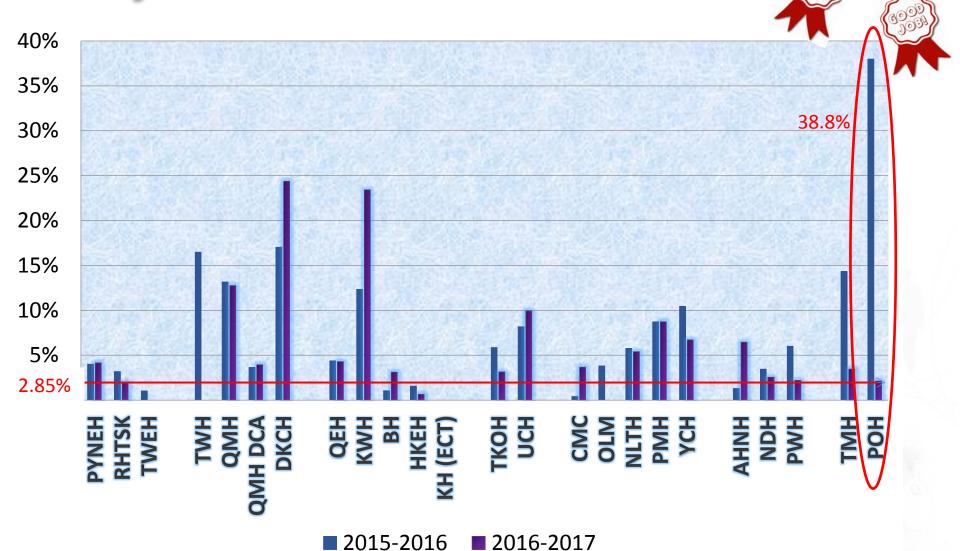


➤ Regulate hypothermia workgroup meeting and audit the result





Key Performance Index



Acknowledgement:

Team Leader: Helen Leung (DOM)

Facilitator : Dr. Vansie (AC), Fu Mui Fun (WM)

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Reference:

Bayter-Marín JE, Rubio J, Valedón A, Macías ÁA (2017). <u>Hypothermia in elective surgery: The hidden enemy.</u> Colombian Journal of Anesthesiology: 45:48–53.

National Institute for Health and Care Excellence (2016). <u>Hypothermia: Prevention and management in adults having surgery.</u>







