

FIRE SAFETY

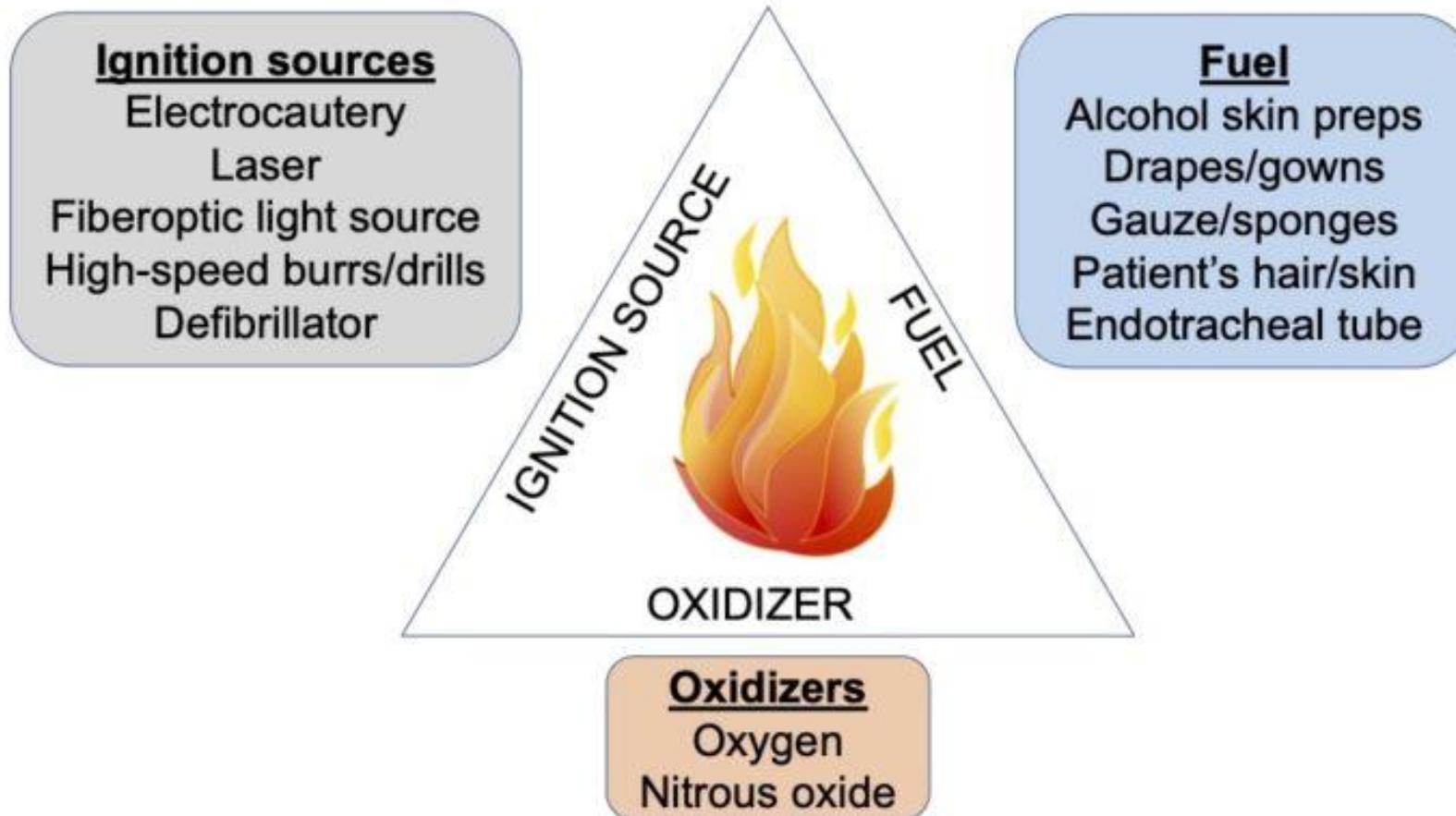
Operating Room Suite



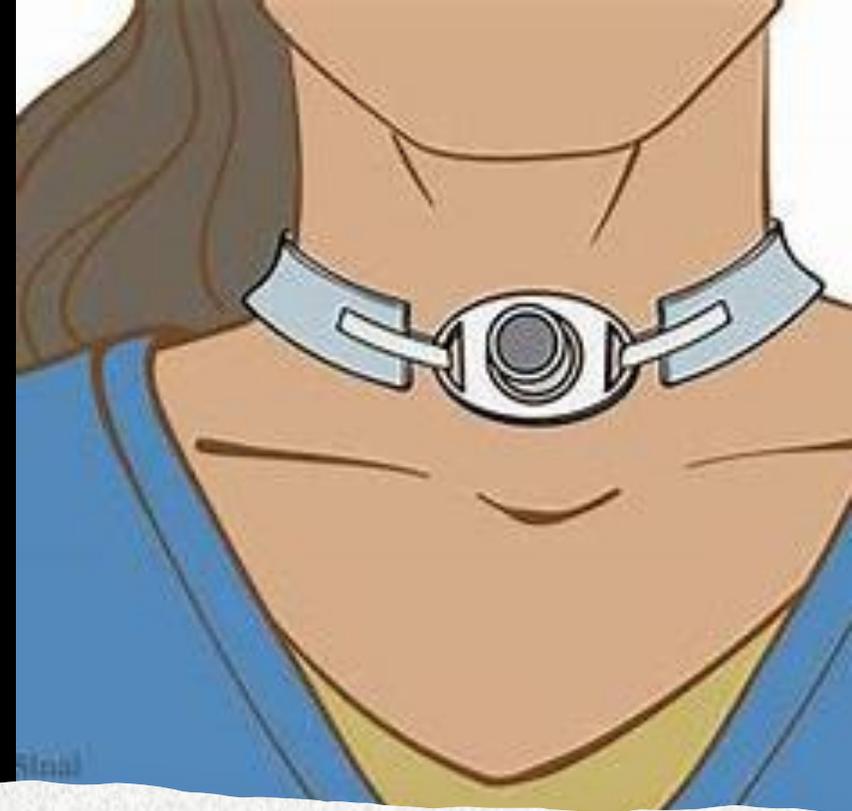
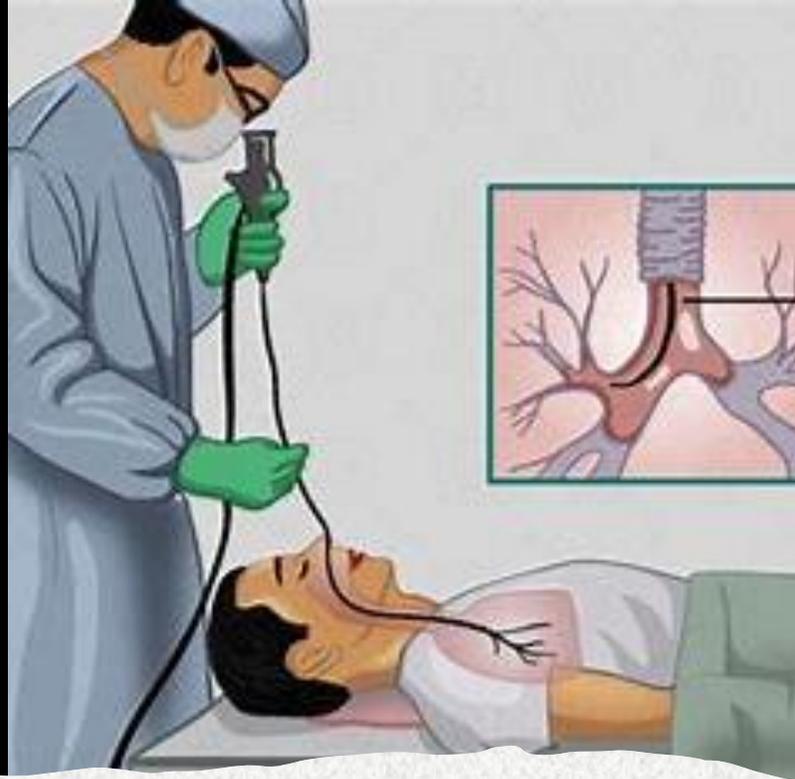
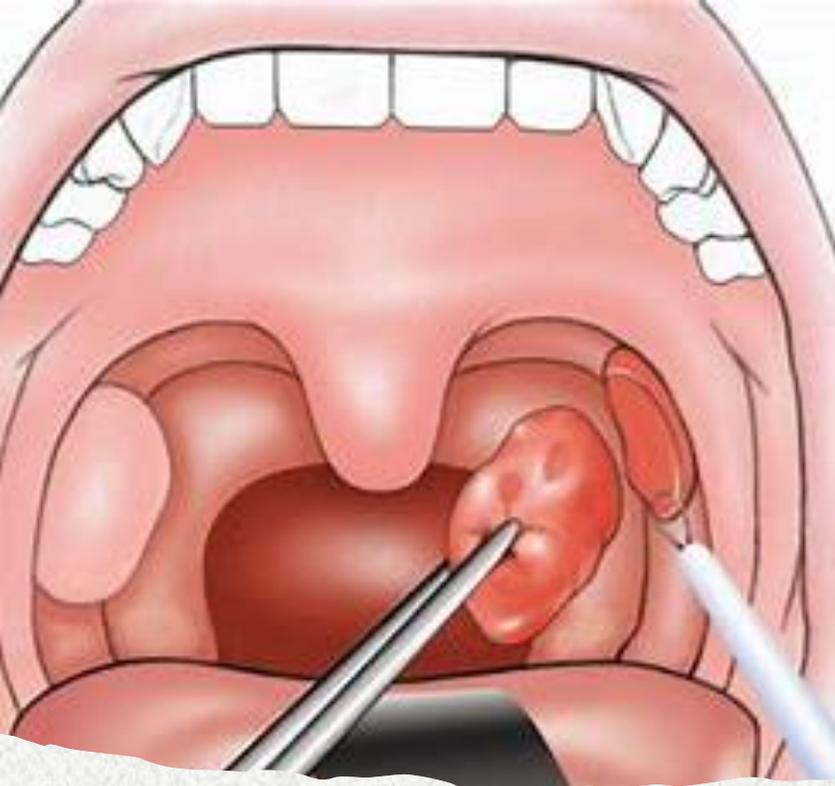


A SURGICAL FIRE...

- Is a fire in, on, or around a patient who is undergoing a medical or surgical procedure
- Is considered a sentinel event & preventable
- **65%** of surgical fires occur on the **head, neck, face and upper trunk**



3 Main Contributing Factors



Room air can be used in surgeries such as:

- ✓ Tracheostomies
- ✓ Tonsillectomies
- ✓ Bronchoscopies

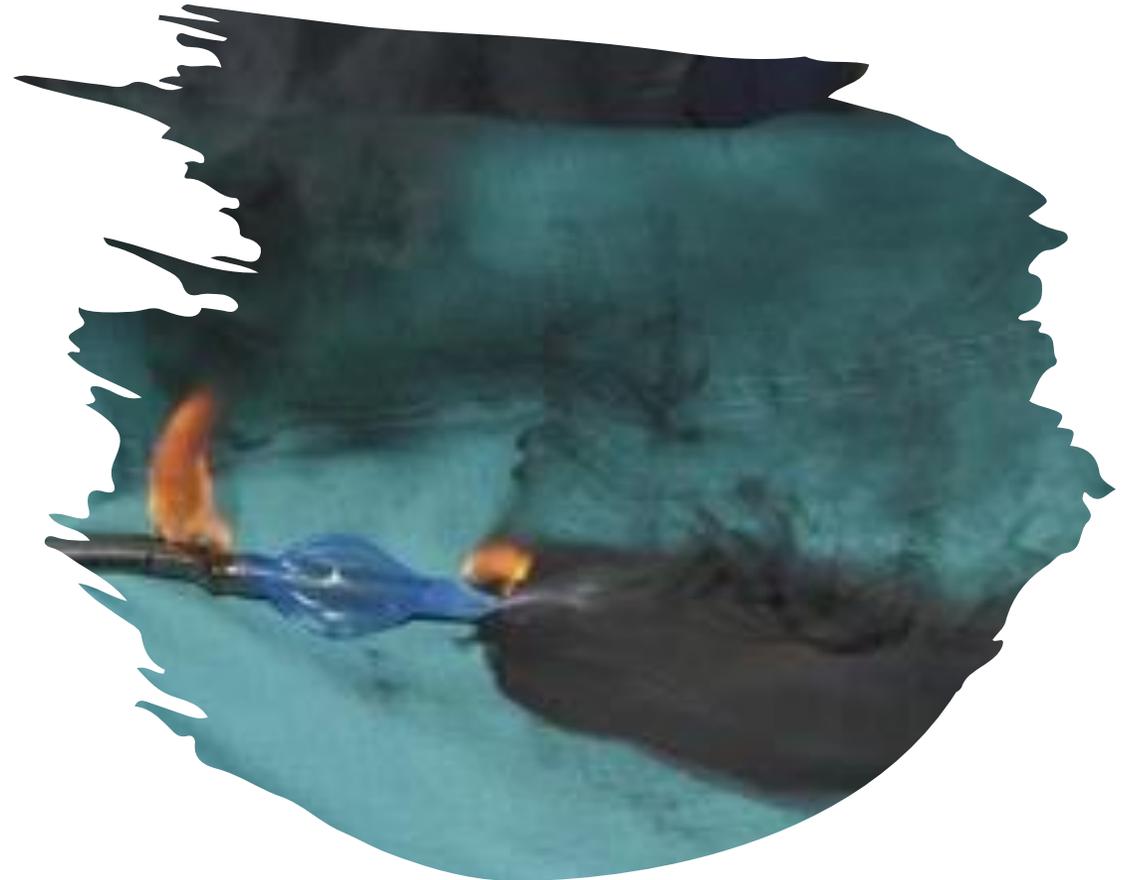
Flash Fire

- **30%** O₂ needed to start a flash fire
- Clinicians can reduce the risk of surgical fires by maintaining oxygen levels below 30%
- Minor elevations in oxygen concentration as a result of supplemental oxygen and/or surgical drapes result in an astronomically increased risk for fire.

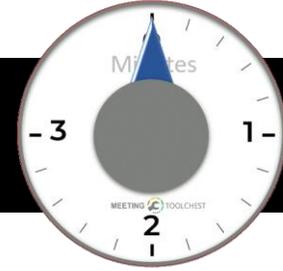


Flash Fire

- **Reduce risk by:**
 - Blending oxygen with room air to decrease the concentration of oxygen delivered to the patient
 - Diluting the under drape area space with air via the anesthesia circuit
 - Using modified draping techniques that allows for increased air flow in the under drape area.



WAITING GAME



Wait to drape or start surgery at least
3 minutes or until the alcohol-based prep is dry to help minimize the risk for surgical fire

IF A SURGICAL FIRE STARTS...

- Immediately shut off all oxygen/nitrogen supply to the patient
- Immediately remove burning drapes from the patient and douse the fire and the patient with saline to put the fire out.
- Use a fire extinguisher on the drapes if necessary





PREVENTING FIRES IN THE OROPHARYNX...

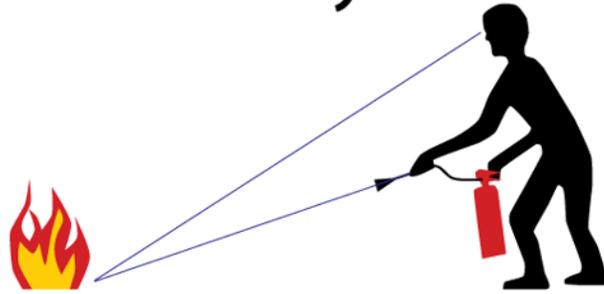
- decrease oxygen concentration below **30%**
- suction oropharynx before using electrocautery device
- use metal suction device instead of plastic one.

P.A.S.S

Pull
the pin



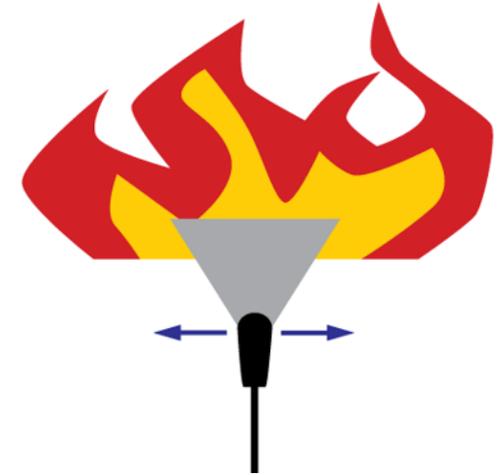
Aim at base
of fire 8'-10'
away



Squeeze



Sweep



PASS is a mnemonic used to remember the four basic steps for using a fire extinguisher

- Pull the pin
- Aim at the base of the fire
- Squeeze the handle of the extinguisher
- Sweep back and forth until the fire is extinguished

R.A.C.E

IN CASE OF FIRE
REMEMBER *RACE*

R **'Rescue'**
ANY PERSONS IN
IMMEDIATE DANGER



A **'Alarm'**
ALERT OTHERS BY
ACTIVATING ALARM



C **'Contain'**
THE EMERGENCY BY
CLOSING DOORS



E **'Evacuate'**
EXTINGUISH THE FIRE
IF TRAINED AND
SAFE TO DO SO



In case of a fire, you should follow the R.A.C.E. fire procedure

- Rescue/Remove: Rescue or remove any persons from the immediate scene.
- Alert/Activate: Pull the nearest alarm and call 2000.
- Confine: Close all doors to the hazard or fire area.
- Extinguish/Evacuate: Extinguish the fire using a fire extinguisher or evacuate the area

Your Emergency Evacuation Training Specialists:



PH: 1800 304 944
www.prmtraining.com.au

O.R. FIRE EXTINGUISHER LOCATIONS

MAIN OR:

- Next to the elevator that goes up to the overflow supply room
- Outside room 9 next to the exit stairwell
- Outside room 7 next to the main pyxis room
- Next to the stairwell by the c.v. room
- Main OR doors left side on the wall

WSOP OR:

- Outside Room 2 by pyxis

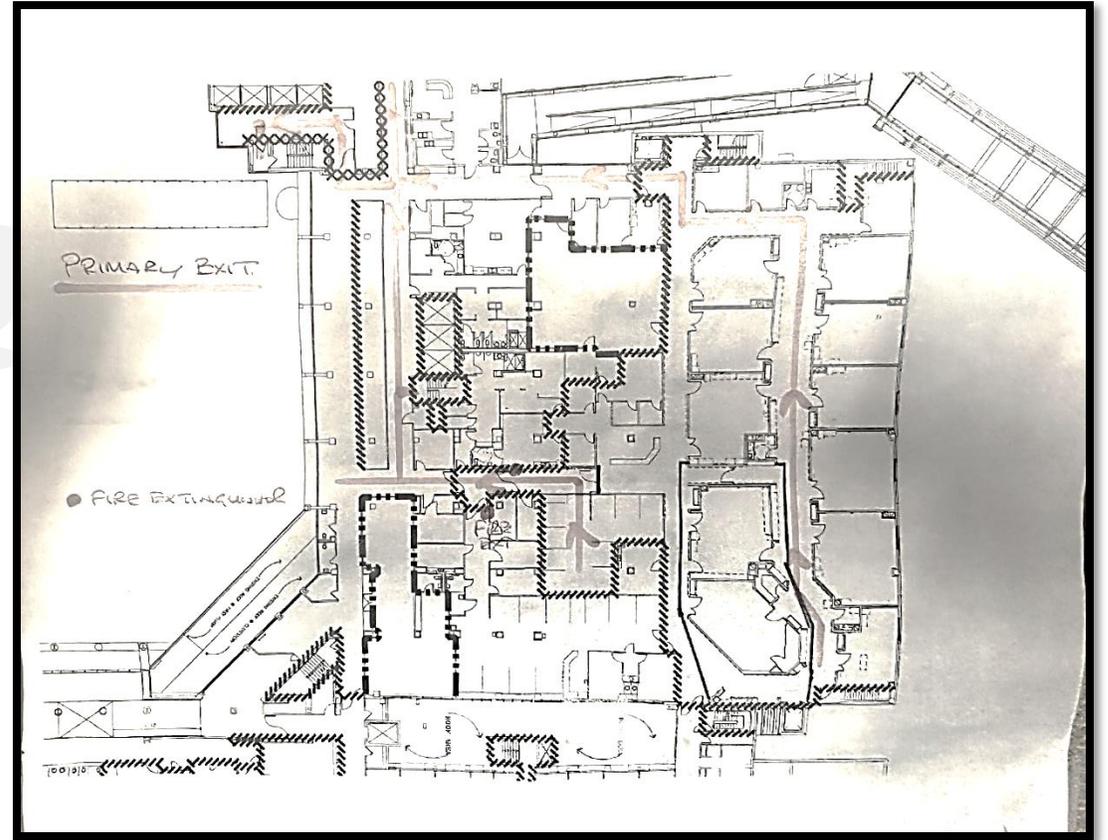


MEDICAL GAS SHUT OFF VALVE LOCATIONS

Outside each OR room on the wall



MAIN OR EMERGENCY EXIT





SEE SOMETHING SAY SOMETHING

Each member of the surgical team is responsible for assessing all hazards that could contribute to a surgical fire, as well as observing the action of all other team members and speaking up immediately if any preventive risk or evidence of a possible fire is observed.