PURPOSE: To set forth guidelines for access of visitors/observers into the controlled environment of the surgical suites.

SCOPE: This policy applies to all persons or personnel making request for or desiring visitation/observation privileges/approval into the surgical suites at UAB University Hospital (UAB Hospital and UAB Highlands) and TKC/OSS.

POLICY STATEMENT: It is our belief that patient care should address the full gamut of patient needs and rights. Establishing and maintaining a therapeutic practice environment will contribute to positive outcomes for patients undergoing surgical or invasive procedures while protecting their rights of privacy, confidentiality and safety.

ASSOCIATED INFORMATION:
A. Definitions:
   1. **“A Visitor”** - for the purpose of this policy, a visitor is defined as any individual of a minimum age of 18 years, who is not associated with the University of Alabama Hospital at Birmingham, University Health Systems or Health Services Foundation in a capacity of employment or as a student of a health-related profession affiliated with the hospital as a training site.
   2. **Observers** - Active Medical Staff members may allow an individual who is not associated with Clinical Facilities, UABHS, UAB, UASOD, UASHP, and UAHSF to observe clinical activities in Clinical Facilities under their direct supervision (“Observer”). These individuals must be 18 years of age, may not engage in clinical activities; are not members of the Medical Staff; and are not subject to the credentialing and appointment requirements of the Bylaws. Active Medical Staff members must notify the Chief of Staff and Credentials Committee, in advance and in writing, of the presence of Observers and the Observers must agree, in writing, to abide by all relevant UAB Medicine standard of conduct and policies and procedures while they are observing in Clinical Facilities. *(Observer Policy) (CR)*
POLICY:
A. Approval Authority:
   1. The Chief of Surgery, Perioperative Nursing Director, Clinical Director of Anesthesia Services, Operating Room Nurse Managers, or designee, shall serve as the approval authority for the granting of visitor/observer privileges at the request of a sponsor.
      a. Per “Observer Policy”, the Chief of Staff and Credentials Committee are to be notified in advance of the presence of the observer(s).
      b. Approval for visitor/observer privilege shall not be extended to any individual who:
         i. Has current or prior knowledge of, or relationship to, the patient for which request is made.
         ii. Does not meet minimum age requirement.
         iii. Does not meet visitor prerequisites and sponsorship processes.
B. Sponsorship:
   1. Sponsorship shall be required for visitor/observer entrance in the OR suites and for remote video observation.
   2. Sponsors may include members of the medical, surgical, nursing or administrative staff.
   3. A letter of sponsorship shall be submitted to the approval authority that must specify the name/s, date, approximate time-frame, purpose and scope of activities for which request is being made.
   4. Sponsors shall be responsible for the visitor/observer’s behavior and compliance with the provision of this or any other institutional standards or policies.
   5. Written confirmation of appointments shall be faxed to the OR Nurse Manager one working day prior to the planned date of visit/observation.
   6. The nurse manager or department director reserves the right to veto an approval authority decision to grant visitation or viewing privileges.
C. Visitor/Observer Prerequisites:
   1. The visitor/observer shall meet the minimum requirement of 18 years of age.
      a. Exception to the required minimal observer age of 18 years will be made for the PRISM Surgeon Mentoring program, or similar approved mentoring program, members under the guidance of the Chief of Surgery and their respective surgeon mentor. PRISM mentees, or similar approved mentees, will observe procedures only.
   2. A family member of surgical, medical or nursing staff may be permitted to observe if express consent is granted by the Approval Authority.
      a. The family member shall be required to meet the same guidelines as any other visitor/observer but sponsorship must be by a care provider other than the family member’s parent.
      b. The family member cannot observe any procedure in which the parent is involved or the parent or family member has current or prior knowledge of, or relationship to, the patient for which observation is requested.
   3. The visitor/observer shall present a written request for visitation privileges to the sponsor.
   4. Visitors/observers shall also obtain and submit written permission from the attending surgeon of the patient for which request is being made, should that differ from sponsor.
   5. The letter shall be dated and signed by the sponsor upon agreement of sponsorship.
   6. All visitors/observers shall be required to sign in and out in the visitor log in the Perioperative Division Office.
   7. All visitors/observers shall present a photo ID issued by their home institution, school affiliation, employer or state DOT when checking in at the Periop Office.
      a. Identity of family member of staff members may be confirmed by parent.
   8. All visitors/observers shall be required to wear an identification badge issued by the Perioperative office.
      a. Temporary identification issued shall be returned to the secretary when the visitor signs out of the OR.
D. Visitors/Observers shall present a signed confidentiality agreement form and a Rules of Behavior form to the office secretary.

E. **Visitor/Observer Behavior and Access:**
   1. All visitors/observers shall be attired in appropriate scrub attire, follow established traffic patterns, and wear protective personal equipment, as appropriate.
   2. Visitors/Observers shall be escorted to the designated area of observation by a member of the operating room staff.
   3. Patient care providers reserve the right to ask a visitor/observer to leave the room if at any time during the procedure it is felt that the visitor’s/observer’s presence is interfering with performance of patient care or responsibilities.
   4. Access of visitors/observers shall be confined to the surgical suite for which the observation is planned.
   5. Visitors/Observers shall not be allowed to participate in any direct or indirect care activities.
   6. Visitors/Observers shall be expected to comply with existing standards and policies of the institution to include policies regarding photography and confidentiality of information.
   7. The presence and use of cellular phones is prohibited in the OR and adjoining corridors.
   8. An adult family member or legal guardian of a patient, may be allowed to shortly visit the OR when situations, disabilities, or incapacities dictate and warrant such attendance.
      a. Approval shall be obtained by the surgeon, registered nurse and anesthesia care provider in attendance.
      b. Family members shall not be allowed to remain in the OR for the procedure and shall be escorted to appropriate waiting areas at the appropriate time.

F. **OR Staff Behaviors:**
   1. OR staff shall verify approval processes have been followed, appropriate attire has been donned, and proper identification is visible.
   2. OR staff shall monitor visitors'/observers’ presence in the OR and around the sterile field at all times.
   3. Names of visitors/observers physically present in the room shall be documented in the intraoperative nursing record as ‘other attendees’.
   4. Operating room employees desiring visitation privilege, but not assuming direct-care responsibilities for the patient, shall be required to comply with the same guidelines as a non-hospital/health services/health system employee.

G. **Process:**
   1. Visitor/Observer makes request to sponsor for visitation privilege.
   2. Visitor/Observer reads and signs a ‘confidentiality of information’ form and a ‘rules of behavior’ form.
   3. Sponsor faxes a copy of letter to the approval authority.
   4. Visitor/Observer secures dated and signed letter of sponsorship and applicable forms from sponsor.
   5. Approval authority faxes approved copy of letter to OR leadership.
   6. On day of visit, visitor/observer presents sponsorship letter and forms to Perioperative Office personnel.
   7. Visitor/Observer shows appropriate personal identification to office personnel.
   9. Perioperative Office staff notifies OR nurse manager or designee of visitor/observer readiness to proceed to the designated area.
   10. The OR Team Leader, or designee, shall confirm appointment and escort the visitor/observer into the OR at the appropriate time.
   11. Upon completion of appointment, visitor/observer will be escorted to control desk to notify charge personnel of planned departure and shall be escorted back to the Perioperative Office to sign out.
REFERENCES:
None

CMS: N/A

TJCH: RI 01.01.01, EC 02.06.01, LD 03.03.01 (2011)

Cross-References (CR):

- *Confidentiality Agreement Form F# 9r2
- *Observer Policy (CR)
- *Traffic Patterns in the OR (CR)
- *Authorized Media Recording in the Operating Suite (CR)
- *Rules of Behavior for UABHS Information Systems F# 899
- *Social Media (CR)
- *Confidentiality of Information (CR)
- *Rules of Behavior for UABHS Information Systems (CR)
- *Vendor Representatives in the Perioperative Division (CR)
- *Healthcare Industry Representatives (Vendors)(CR)
- *Patient Visitation (CR)
- *Consent to Photograph, Videotape, Audiotape or Film (CR)
- *Consent to Photograph, Videotape, Audiotape or Film (CR)
- *Traffic Patterns in the OR (CR)
- *Patient Visitation (CR)
- *Observer/Shadowing Policy(CR)

REFERENCES: None

ATTACHMENTS: None

INTERDISCIPLINARY COLLABORATION

Physician / Medical Committees
Perioperative Policies Committee: None

Committees / Councils
None

Endorsement Date
02/01/2019 & 03/05/2019

Endorsement Date

Tracking Record

Supersedes: Visitor Control in the Operating Room 02/01/99, 03/17/03, 11/06/06

Visitor Permission Guidelines for the Operating Room HI# 191, 08/03/09, 09/05/11, 04/24/16

File Name: Visitor Permission Guidelines for the Operating Room # 362r5

REVISIONS: Consistent with Joint Commission Standards, this standard is to be reviewed at least every 3 years and/or as practice changes.