

Annexure-3a

Checklist for Preparedness of site during FDS for Sterilization Procedure

Checklist for Preparedness of site during FDS for Sterilization Procedure

Name of facility/City:

Date:

Name of TO Quality:

| S No | Requirement | Check | Remarks |
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| Prerequisites | | | |
| 1 | Site of sterilization FDS- established private facility? | | |
| 2 | Is the surgery team and client ratio maintained at 1:10:15? | | |
| 3 | Is sufficient time allotted for the FDS (7 hours)? | | |
| 4 | Empanelled surgeon (1) for tubectomy/ vasectomy available? | | |
| 5 | Anesthetist (1) available for minilap/ laparoscopy? | | |
| 6 | OT Assistant (1) available for minilap/ laparoscopy? | | |
| | Instrument sets (based on client load 10-15 for 1 surgical team) <ul style="list-style-type: none"> • Minilap sets (5) • Laparoscope sets • NSV kits /Conventional vas kit (5) • Insufflator (1) • CO2 cylinder (2) | | |
| OT Facilities | | | |
| 1 | Proper OT available? | | |
| 2 | OT support staff available? | Staff Nurse(1) <input type="checkbox"/> OT Attendant (1) <input type="checkbox"/> Cleaner (1) <input type="checkbox"/> | |
| 3 | Running water in OT available? | | |
| 4 | Operation table with Trendelenburg facility available? | | |
| 5 | Shadow-less lamp available? | | |
| 6. | Emergency light available? | | |
| 7 | Functional anesthetic instruments and drugs (Refer list1) (Boyle's apparatus, laryngoscope, nitrous oxide cylinder) | | |
| 8 | Emergency resuscitation equipment (Ambu bag, endotracheal tubes, oxygen cylinder) available? | | |
| 9 | Is suction apparatus available? | | |
| 10 | Emergency medicines (check expiry dates) available?- Refer list2 | | |
| 11 | Sterilized consumables | | |
| 12 | Sterilized surgical attire (apron, gloves, mask, cap) | | |
| 13 | Are the floor and table tops being cleaned with 0.5% chlorine solution before the procedure? | | |
| 14 | Is decontamination of operating room surfaces coming in client contact between procedures with 0.5% chlorine solution being done? | | |

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| 15 | Is fumigation of OT or procedure room done? | | |
| 16 | Traffic in the OT is limited to essential personnel? | | |
| Laboratory | | | |
| 1 | Lab support staff available? | Lab Technician (1) <input type="checkbox"/> Cleaner (1) <input type="checkbox"/> | |
| 2 | Hemoglobin-meter | | |
| 3 | Apparatus for urine sugar & albumin | | |
| 4 | Urine pregnancy test apparatus/ strips | | |
| 5 | Reagent | | |
| Infection Prevention | | | |
| 1. | IP support staff available? | OT Attendant (1) <input type="checkbox"/> Ward Boy/Ayah (1) <input type="checkbox"/> | |
| 2. | Running water and soap available? | | |
| 3. | Is decontamination using 0.5% chlorine solution being done? | | |
| 4. | Is fresh chlorine solution prepared in the beginning of each day? | | |
| 5. | Needle cutter available? | | |
| 6. | Puncture resistant container for sharp instrument disposal? | | |
| 7. | Does the support staff use utility gloves for cleaning floor, linen, instruments | | |
| 8. | Functional autoclave/ boiler available? | | |
| 9. | Are the laparoscopes being processed after each procedure? <ul style="list-style-type: none"> • Decontamination using 60-90% ethyl or isopropyl alcohol? • Cleaning and drying? • HLD using 2% glutaraldehyde for 20 minutes? | | |
| 10. | Waste disposal mechanism available | Segregation <input type="checkbox"/> Incineration <input type="checkbox"/> Burial <input type="checkbox"/> Other, Specify _____ | |
| 11. | Is the waste being placed in closed containers before being picked up by municipal authorities? | | |
| 12. | Is the liquid waste being poured down the utility drain or toilet with a flush or buried? | | |
| Post-procedure | | | |
| 1 | Are the clients observed by the doctor after 4 hours of surgery? | | |
| 2 | Is a compounder/ pharmacist available? | | |
| 3 | Is sufficient stock of post-operative medicines available? (check expiry date) Refer list 3 | | |
| | Other requirements for FDS | | |
| | Functional generator POL available Ambulance facility for referral in case of emergency Identified place for counselling as per client load Identified place for examination and pre medication as per client load. | | |

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| | <p>List 1- Anesthesia drugs: Female Sterilization Male Sterilization</p> <ol style="list-style-type: none"> 1. Inj. Diazepam 2. Inj. Promethazine 3. Inj. Pentazocine 4. Inj. Atropine 5. Inj. Pethidine 6. Inj. Xylocaine 7. Inj. Ketamine 8. Inj. Scoline 9. Inj. Pentothal <p>List 2-Emergency drugs: Female Sterilization Male Sterilization</p> <ol style="list-style-type: none"> 1. Inj. Adrenalin 2. Inj. Hydrocortisone 3. Inj. Chlorpheniramine Maleate 4. Inj. Frusamide 5. Inj. Atropine 6. Inj. Mephentine 7. Inj. Aminophylline 8. Inj. Deriphylline 9. Inj. Soda Bicarb. 10. Inj. Diazepam 11. I/V fluids 5% dextrose 12. Normal Saline 13. Ringer Lactate 14. Inj Midazolam 15. Plasma Expanders <p>o. Required</p> <p>List 3- Post-operative drugs</p> <ol style="list-style-type: none"> 1. Cap. Amoxycillin-cloxacillin (250 mg + 250 mg) 2. Tab. Ciprofloxacin 500 mg 3. Tab. Ibuprofen 400 mg 4. Tab. B Complex 5. Tab. Iron | | |
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