Children's Hospitals and Clinics of Minnesota

Practice Update

The Center for Professional Development & Practice

May 20, 2014

Tampon Use in the Operating Room

The question of whether the use of tampons for patients undergoing general anesthesia was raised following an incident where a tampon was left in patient greater than 24 hours who had undergone a neurological procedure and was in the PICU. Currently we do not have a standard of care. This sparked a discussion with professional staff to assist in determining the best practice. Dr. Rachel Miller, Children's pediatric and adolescent gynecologist, recommends that ***tampons, menstrual cups or sponges are removed prior to anesthesia***. This recommendation is supported by the anesthesia medical directors, Dr Reiner, Dr. McCormick, and our chief of surgery, Dr. Schmeling.

Here are the changes in practice **effective May 20th, 2014**.

Preoperative:

- Ask the question for menstruating females whether they are currently using a tampon, menstrual cup or sponge.
- Explain it is for their safety that they remove the tampon prior to surgery.
- Provide the patient with mesh underwear and a sanitary pad to use during surgery.
- Document the information in the preop assessment record under Patient Safety/ Checks found in the Screening segment. The documentation will flow to the preop QV and the Periop Handoff tab (see attached "On the Record").

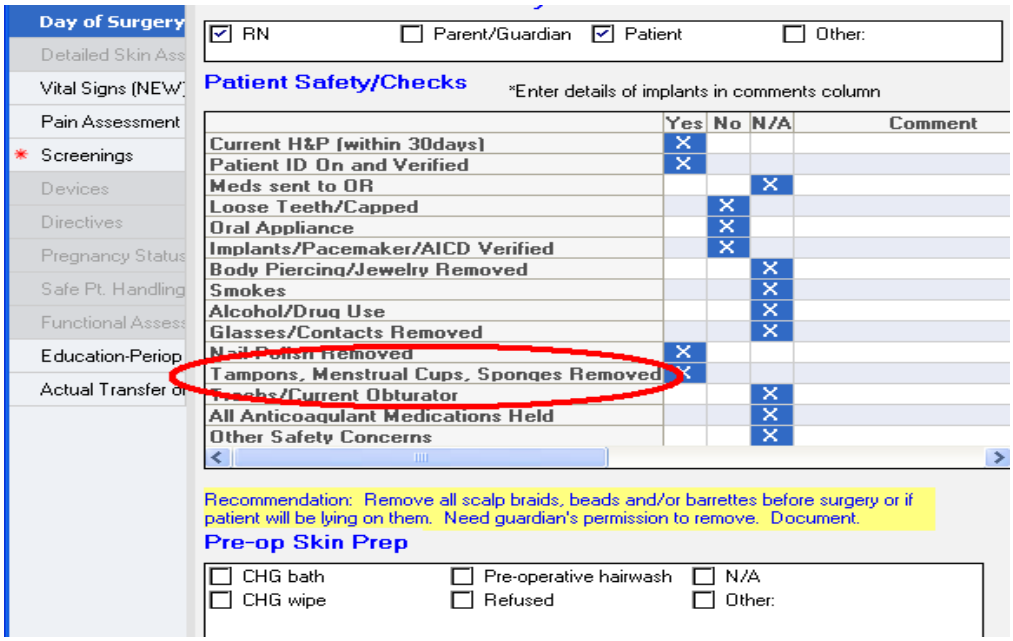
OR:

- If you notice a tampon in please remove and fill out a Safety Learning Report.

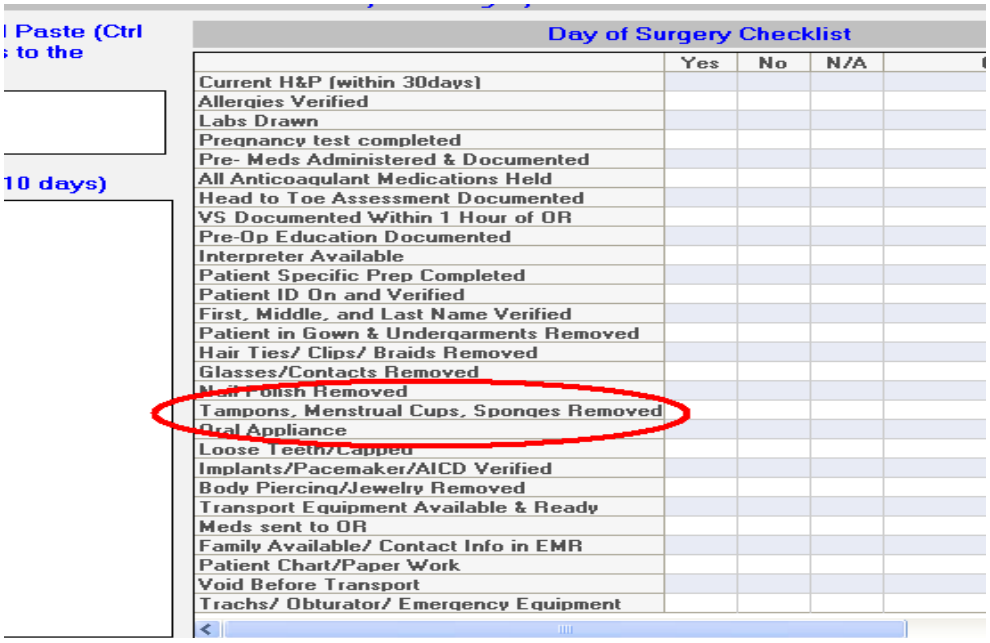
Preop Assessment Powerform Changes: Re. Feminine Hygiene Products.

There is a change to both the **Preop Assessment Record** and the **Preop Assessment Record-Inpatient** to document the removal of feminine hygiene products before surgery.
This information will flow to the Preop QV and the Periop Handoff.

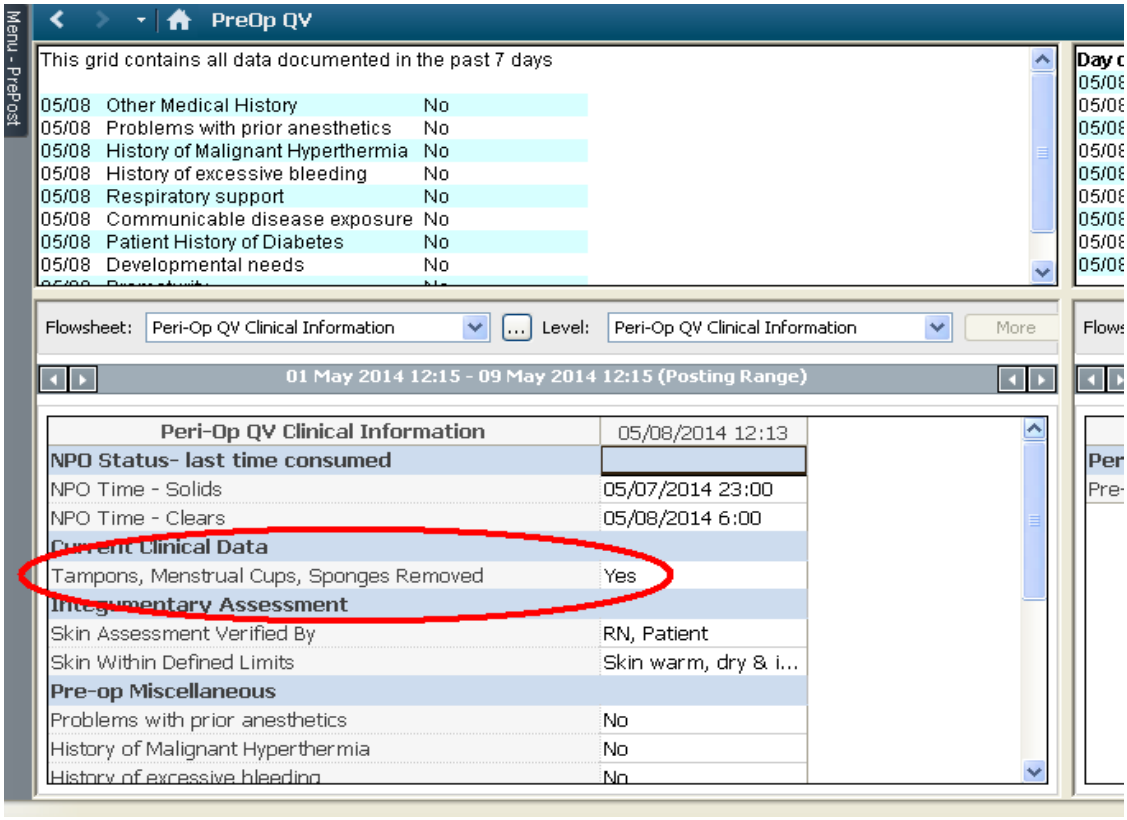
Preop Assessment Record: Day of Surgery Section: Patient Safety/Checks



Inpatient Preop Assessment Record



Preop QV



Periop Handoff