SCIP-1 & OP-6 - PROPHYLACTIC ANTIBIOTIC PREOP TIMING

Prophylactic antibiotic to be administered within one hour** prior to surgical incision.

SCIP-2 & OP-7 - PROPHYLACTIC ANTIBIOTIC SELECTION

**SCIP CARD 2 - BETA-BLOCKER THERAPY

Patients on beta-blocker therapy should receive beta-blocker prior to arrival or during the perioperative period (within 24 hours prior to surgery through postop day 2 [POD2]). If postop length of stay is ≤ 2 days, administer beta-blocker on day prior to or day of surgery only. If length of stay is ≥ 2 days, administer beta-blocker on day prior to or day of surgery and POD1 or POD2.

SCIP-VTE - VENOUS THROMBOEMBOLISM (VTE) PROPHYLAXIS

The only operations for which oral antibiotics alone are acceptable are the Prostate biopsy and Pubovaginal sling procedures.  

SCIP-3 - PROPHYLACTIC ANTIBIOTIC DISCONTINUATION WITHIN 24 HOURS (48 HOURS FOR CV SURGERY) AFTER SURGERY END TIME

Administration of antibiotics for more than 24 hours after the incision is closed offers no additional benefit to the surgical patient. DOCUMENTATION REQUIRED FOR THERAPEUTIC ANTIBIOTICS.

SCIP-9 - URINARY CATHETER REMOVAL – POD 1 or POD 2

Urinary catheter removal on postoperative day 1 or 2 (day of surgery being zero).

SCIP-10 - PERIOPERATIVE TEMPERATURE MANAGEMENT

Temperature must be equal to or greater than 99.5°F within 30 minutes prior to, or the 15 minutes immediately after, anesthesia end time.

SCIP-4 - POSTOPERATIVE BLOOD GLUCOSE (**SCIP CARD 2 - BETA-BLOCKER THERAPY

Hyperglycemia has been associated with increased in-hospital morbidity and mortality for many medical and surgical conditions. Once identified, hyperglycemia could minimize adverse outcomes for cardiac surgical patients.

SCIP-5 - HAIR REMOVAL FOR SURGERY PATIENTS

Acceptable: Hair removal with clippers or depilatory ONLY or nothing at all. Unacceptable: Use of razors.