



POSITION STATEMENT ON MANAGING NOISE AND DISTRACTION IN THE PLASTIC SURGICAL SETTING

INTRODUCTION

The International Society of Plastic and Aesthetic Nurses (ISPN) supports reducing noise and distractions in all patient care areas to create a safe environment for patients and aesthetic and plastic surgical team members. Although it may not be possible to completely eliminate all noise and distractions from the plastic surgical setting, ISPN is committed to advocating for a controlled environment where noise and distractions that do not serve a clinical function are minimized as much as possible.

RATIONALE

- Operative procedures and patient care activities require attentiveness, concentration, and situational awareness (Jorm & O'Sullivan, 2012).
- The plastic surgical setting is an environment where patient safety and team member performance are heavily reliant on the accurate transmission of information (Christian et al., 2006).
- Noise and distraction contribute to miscommunication by reducing the plastic surgical team member's ability to communicate effectively and making it difficult to understand content (Jorm & O'Sullivan, 2012).
- Noise and distracting stimuli can significantly impact plastic surgical team members by disrupting patient care and surgical procedures, negatively impacting surgical team members' performance, increasing the risk for error, and potentially resulting in patient harm and adverse patient outcomes (Jorm & O'Sullivan, 2012; Feuerbacher, Funk, Spight, Diggs, & Hunter, 2012; Suh et al., 2010; Campbell, Arfanis, & Smith, 2013; Pluyter, Buzink, Rutlowski, & Jakimowociz, 2010; Persoon, Broos, Witjes, Hendrikx, & Scherpbier, 2011).
- Ring tones and alarms from medical equipment and electronic devices and the use of personal electronic devices may distract team members from focusing on the patient and providing safe patient care (Papadakos, 2014).
- The use of portable electronic devices increases the risk for patient health care violations related to patient privacy (Fillipo & Fencl, 2016).
- Portable electronic devices also harbor bacteria, placing the patient at risk for infection (Fillipo & Fencl, 2016).

- Noise and distraction have been linked to poor team member performance and are also associated with job dissatisfaction, irritability, tachycardia, anxiety, fatigue, illnesses, stress, emotional exhaustion, burnout, and injury (Joseph & Ulrich, 2007; Mazer, 2005; Oliveira & Arenas, 2012; Juang, Lee, Yang, & Chang, 2010).

RECOMMENDATIONS

- A multidisciplinary team approach should be implemented to reduce the level of noise and distractions and create a safe environment for patients and plastic surgical team members.
- Noise and distractions not related to patient care should be minimized.
- Non-procedure-related conversation and activities should be prohibited during critical phases of the plastic surgical procedure.
- Noise and distraction created by the following should be minimized:
 - portable communication devices (e.g., cell phones, beepers, personal digital assistants);
 - fixed communication devices (e.g., overhead pagers and announcements, telephones, computers);
 - electronic music devices (e.g., radios, digital audio players);
 - the environment (e.g., heating, ventilation, air conditioning systems, pneumatic tube systems);
 - medical equipment and devices (e.g., smoke evacuators, powered surgical instruments, metal instruments);
 - electronic activities (e.g., e-mail, texting social media [e.g., Facebook, YouTube®, Twitter®, Snapchat] Internet, games); and
 - behavioral activities (e.g., nonessential and extraneous conversations, personnel movement in and out of the room).
- Unless directly required for job performance, portable communication devices should be turned off, placed on vibrate or silent mode, or left at a common location outside of the procedure room.
- Fixed communication devices should be used only for essential communication and at the lowest volume possible.
- The volume level of electronic music should be low enough to allow communication among team members.
- Essential verbal communications should be audible above competing environmental noise.
- Medical device alarms and activation sounds intended for safety purposes (e.g., to alert the user that the device is engaged) should be audible above competing environmental noise.
- The health care facility should establish a policy and procedure for the use of mobile communication devices that includes use of personal devices, use of facility-owned

devices, locations or prohibited locations for use, information that may be conveyed by the device, level of encryption and security controls, and device cleaning protocols.

Note. Recommendations adapted with permission from the Association of periOperative Registered Nurses (AORN) Guideline for a Safe Environment of Care, Part 2 (Burlingame & Conner, 2017).

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DISCLAIMER

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Drafted: May 12, 2017

Revised:

Approved by ISPAN Board of Directors: July 10, 2017