Intraprocedural Recommendations for Reducing Surgical Site Infections (SSI's)

The American Society of Regional Anesthesia and Pain Medicine (ASRA Pain Medicine) consensus recommendations for infection control based on pain procedure classifications (refer to table 3 in the article).

Procedure Type Classifications: A B C D

Grade A Recommendations

(high certainty that the net benefit is substantial)

- Avoid unnecessary delays that result in increased procedure duration.[C,D]

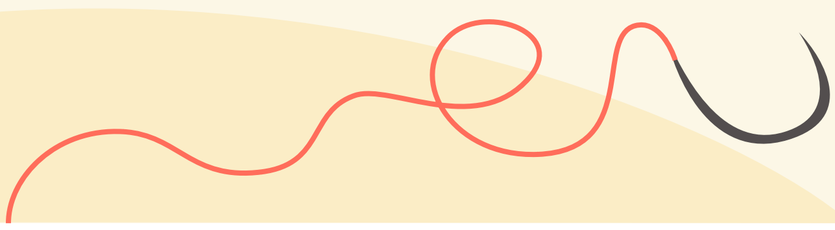
Grade B Recommendations

(high certainty that the net benefit is moderate, or moderate certainty that the net benefit is substantial)

- Sterile gloves[A,B,C,D]
- Chlorhexidine-based products are the preferred skin antiseptic in surgical and interventional pain procedures (including neuraxial).[A,B,C,D]
- Personal protective equipment (surgical cap and eye protection).[B,C,D]
- Sterile surgical gown.[C,D]
- The rubber septum on medication vials should be disinfected with alcohol prior to piercing.[A,B,C,D]
- Use of a styletted needle is recommended when performing intradiscal procedures.[C]
- A double-needle technique for performing intradiscal procedures is recommended.[C]
- Sterile C-arm cover.[C,D]
- Avoid contact with C-arm.[A,B,C,D]
- Operating rooms should have high efficiency particulate air filtration systems.[C,D]
- Maintain operating room humidity levels between 20% and 70%.[C,D]
- Full-length patient surgical body drape.[C,D]
- Limit tissue trauma, maintain homeostasis, eradicate dead space, and avoid the electrocautery at tissue surface.[D]

Grade C Recommendations

(moderate certainty that the net benefit is small)

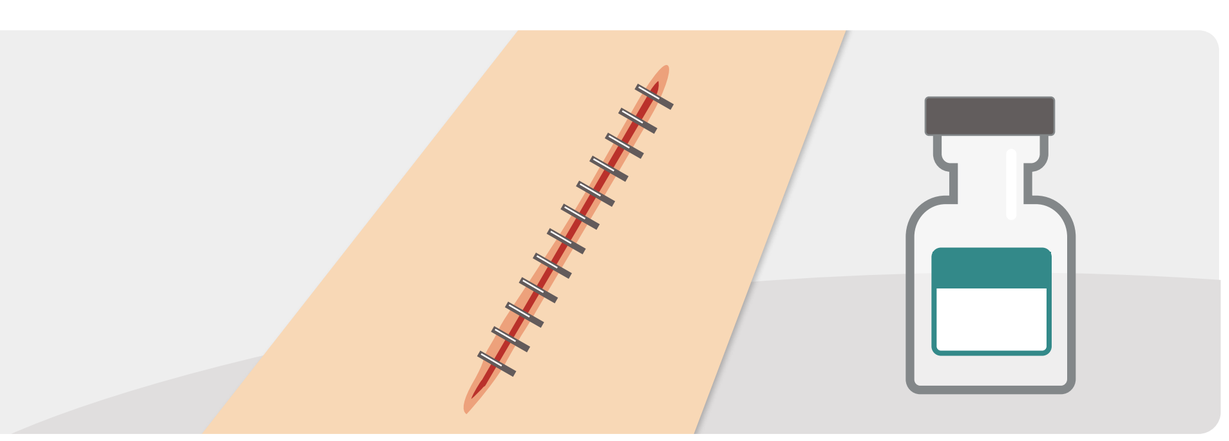


- Minimize operating room traffic.[C,D]
- Monofilament rather than multifilament sutures should be considered for superficial skin closure.[D]
- Triclosan-coated sutures can be considered in patients at elevated risk for SSIs.[D]

Grade I Recommendation

(evidence is lacking, of poor quality, or conflicting, and the balance of benefits and harms cannot be determined)

- Application of vancomycin powder to the surgical wound is not routinely recommended.[D]



ASRA PAIN MEDICINE

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