


Guideline Implementation: Autologous Tissue Management

1.7  www.aorn.org/CE

MARIE A. BASHAW, DNP, RN, NEA-BC

Continuing Education Contact Hours

 indicates that continuing education (CE) contact hours are available for this activity. Earn the CE contact hours by reading this article, reviewing the purpose/goal and objectives, and completing the online Examination and Learner Evaluation at <http://www.aorn.org/CE>. A score of 70% correct on the examination is required for credit. Participants receive feedback on incorrect answers. Each applicant who successfully completes this program can immediately print a certificate of completion.

Event: #15531

Session: #0001

Fee: Members \$13.60, Nonmembers \$27.20

The contact hours for this article expire September 30, 2018. Pricing is subject to change.

Purpose/Goal

To provide the learner with knowledge specific to implementing the AORN "Guideline for autologous tissue management."

Objectives

1. Describe the US Food and Drug Administration exclusion regarding registration as a tissue bank or tissue establishment.
2. Identify benefits of using the patient's autologous tissue for transplantation or delayed replantation.
3. Discuss packaging and labeling of autologous tissue.
4. Describe actions to take when an autograft is contaminated.
5. Discuss management of avulsed teeth.

Accreditation

AORN is accredited as a provider of continuing nursing education by the American Nurses Credentialing Center's Commission on Accreditation.

Approvals

This program meets criteria for CNOR and CRNFA recertification, as well as other CE requirements.

AORN is provider-approved by the California Board of Registered Nursing, Provider Number CEP 13019. Check with your state board of nursing for acceptance of this activity for relicensure.

Conflict-of-Interest Disclosures

Marie A. Bashaw, DNP, RN, NEA-BC, has no declared affiliation that could be perceived as posing a potential conflict of interest in the publication of this article.

The behavioral objectives for this program were created by Liz Cowperthwaite, BA, senior managing editor, and Rebecca Holm, MSN, RN, CNOR, clinical editor, with consultation from Susan Bakewell, MS, RN-BC, director, Perioperative Education. Ms Cowperthwaite, Ms Holm, and Ms Bakewell have no declared affiliations that could be perceived as posing potential conflicts of interest in the publication of this article.

Sponsorship or Commercial Support

No sponsorship or commercial support was received for this article.

Disclaimer

AORN recognizes these activities as CE for RNs. This recognition does not imply that AORN or the American Nurses Credentialing Center approves or endorses products mentioned in the activity.

<http://dx.doi.org/10.1016/j.aorn.2015.07.003>

© AORN, Inc, 2015

Guideline Implementation: Autologous Tissue Management



1.7  www.aorn.org/CE

MARIE A. BASHAW, DNP, RN, NEA-BC

ABSTRACT

Managing autologous tissue correctly may help prevent patients who are undergoing replantation or autotransplantation of tissue from developing a surgical site infection. The updated AORN “Guideline for autologous tissue management” provides guidance on transferring tissue from the sterile field, packaging and labeling, transporting and storing, and handling autologous tissue for delayed replantation or autotransplantation within the same facility. This article focuses on key points of the guideline to help perioperative personnel develop protocols for autologous tissue management. The key points address some of the major tissue types—avulsed teeth, cranial bone flaps, autologous skin—that may be preserved and replanted or autotransplanted. Perioperative RNs should review the complete guideline for additional information and for guidance when writing and updating policies and procedures. *AORN J* 102 (September 2015) 271-280. © AORN, Inc, 2015. <http://dx.doi.org/10.1016/j.aorn.2015.07.003>

Key words: *autologous tissue, cranial bone flap, autograft, avulsed tooth, skin graft.*

Many patients who require surgery may donate autologous tissue for their surgery that day or for a future surgery. In addition, trauma patients may need surgery that involves autologous tissue during their unanticipated care. Facilities that handle autologous tissue either for autotransplantation or delayed replantation into the same patient within the same facility are not required to register with the US Food and Drug Administration (FDA) as a tissue bank or tissue establishment.¹ However, these facilities or health care organizations are required to recover, process, package, label, store, track, and replant or autotransplant the tissue in a manner that minimizes microbial growth, prevents mix-ups, and reduces the risk for errors.¹ Perioperative nurses are the patient’s advocate and should clearly understand management of autologous tissue in the perioperative setting to ensure that the perioperative patient is not exposed to an increased risk for infection.

The AORN “Guideline for autologous tissue management”² was first published in November 2014. AORN guideline documents provide guidance based on an evaluation of the strength and quality of the available evidence for a specific subject. The guidelines apply to inpatient and ambulatory settings and are adaptable to all areas where operative or other invasive procedures may be performed.

Topics addressed in the autologous tissue management guideline include care and treatment of avulsed teeth, autologous cranial bone flaps, parathyroid tissue, skin, and veins (Table 1) and replantation or autotransplantation of dropped or contaminated autografts. This article elaborates on key takeaways from the guideline document; however, perioperative RNs should review the complete guideline for additional information and for guidance when writing and updating policies and procedures.

Download English Version:

<https://daneshyari.com/en/article/2641201>

Download Persian Version:

<https://daneshyari.com/article/2641201>

[Daneshyari.com](https://daneshyari.com)