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Operation of Hope

www.Operationofhope.org

(2017)

HOSPITAL SITE SURVEY

SITE NAME:

ADDRESS:

PHONE #

Email (s):

CONTACT PERSON/S:

Location:

Nearest airport: • • • • • • • •

<u>PRESENT</u>	<u>YES</u>	<u>NO</u>	<u>HOW MANY?</u>	<u>LOCATION</u>	<u>DISTANCE FROM OR</u>
Operating Room (s)					
ICU		√			
RECOVERY					
PEDIATRIC UNIT					
PEDIATRIC ICU					
CATH LAB FACILITY					
CSR					
STORAGE ROOM					
DRESSING ROOMS					
CAFETERIA					

TYPE OF SURGERY HOSPITAL PERFORMS:

Have you ever had cleft teams come before? _____ when: _____ name of group: _____

NUMBER OF Operating rooms AVAILABLE TO OOH's surgical camp?

Name and NUMBER OF PHYSICIANS INTERESTED IN WORKING WITH OPERATION OF HOPE PHYSICIANS

= 2

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HOSPITAL STAFF AVAILABLE TO WORK WITH OPERATION OF HOPE STAFF: _____

OR:

RECOVERY:

Operating Room OPENS at what time: _____
Operating Room CLOSES at what time: _____

RESTRICTIONS FOR OPERATING ROOM/ RECOVERY
(_____)

TRANSPORTATION TO/FROM HOSPITAL _____
NEAREST REFERRAL HOSPITAL FOR CRITICAL PEDIATRIC OR ADULT PATIENT:

Operating Room UTILITIES

ELECTRICAL VOLTAGES AVAILABLE:

NUMBER OF 120 volt OUTLETS IN EACH ROOM:

NUMBER OF 220 volt OUTLETS IN EACH ROOM:

BACK UP POWER SOURCE/GENERATOR? _____

ROOM SIZES: _____

ROOM LIGHTING/SURGICAL LIGHTS:

AIR CONDITIONED?
STERILIZER AVAILABLE? :

If so, STERILIZER TYPE/QTY:
GAS AUTOCLAVE: _____
ELECTRICAL AUTOCLAVE: _____

OTHER: _____

CYCLE TIMES: _____ UNITS: _____

BIPOLAR COAGULATORS: YES

LIGHT SOURCES:

HEADLIGHTS:

DEFIBRILLATORS:

SUCTION (WALL/ PORTABLE?):

CAUTERY Machine:

MEDICAL AIR/ O2 OUTLETS:

ANESTHESIA UTILITIES

GASES IN EACH ROOM:

NUMBER AND GAS TYPE (DISS or DIAMOND) GAS OUTLETS IN EACH ROOM:

(ex: Sevoforane, Halothane, Isoflurane, Oxygen)

OR A:

OR B:

OR C:

OR D:

BACKUP TANKS/ FLOWMETERS: _____

GAS SCAVENGER SYSTEM? _____

ANESTHESIA MACHINES (MAKE/MODEL): _____

OR

OR

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VAPORIZERS—AGENT AND BRAND:

MONITORING SYSTEM (O2 ANALYZER, AGENT ANALYZER, ECG, S PO2, NIBP, DIRECT PRESSURE, TEMP, ETCO2) in EACH ROOM:

VENTILATORS/ QTY/BRAND:

PEDIATRIC VENTILATOR CAPABILITY: _____

I.V. FLUIDS AVAILABLE:

I.V. ADMINISTRATIONS SETS— _____

WHAT NARCOTICS are available?

ARE ANCILLARY ANESTHESIA MEDS READILY Available?

RECOVERY ROOM

HOW MANY BEDS AVAILABLE TO OPERATION OF HOPE?

O2 AVAILABLE AT EACH BED?

SUCTION AVAILABLE AT EACH BED?

WHAT MONITORS AT EACH BED?

STAFF AVAILABLE FOR SUPPORT:

UTILITIES AVAILABLE (GAS OUTLETS, POWER):

WARD / FLOOR

HOW MANY BEDS AVAILABLE TO OOH during the duration of the surgical camp:

Night Nurses available?

O2 AVAILABLE AT EACH BED?

SUCTION AVAILABLE AT EACH BED?

PHONE TO COMMUNICATE WITH OR:

OPERATION OF HOPE EQUIPMENT NEEDED:

SUPPLIES NEEDED:

DISTANCE FROM OR:

ANCILLARY SERVICES AVAILABLE

LAB: _____ **PHARMACY:** _____

DRUGS/ SOLUTIONS AVAILABLE:

RADIOLOGY:

OTHER:

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IN COUNTRY SUPPORT

SURGICAL: Number of Attending _____ How Often: _____

ANESTHESIA: Number of Attending How Often: _____

OR NURSES: _____ SHIFT: How Often: _____

R.R. NURSES: _____ How Often: _____

TRANSLATORS:

SUPPORT STAFF / VOLUNTEERS:

HOSTS / GUIDES:

**What languages are spoken in the hospital?
Patients?**

TEAM SAFETY ISSUES: _____

IMMUNIZATIONS REQUIRED: _____

Are you located in a malaria zone?

What support would the hospital offer specifically to support the OOH team?

Any fess associated with the mission?

I.e. hospital fees, VISA's, registration fees for paperwork?

Lodging for a team of approx. 8-12 people?

Lunches at the hospital?

Transportation from the airport?

Transportation to and from the hospital?

What expectations does the hospital have in regards to the team?

I.e. teaching?

Training?

Expectations with OOH and other partners with such as Smile Train or other cleft teams?

OOH team wears only OOH branded items in the hospital-

Do you have any issues with the OOH team wearing solely OOH logo branded items such as surgical scrubs, t-shirts etc?

The OOH Board has a policy that it will never charge or allow a hospital to charge patients and/or families. Are you in agreement with this policy?

The OOH Board has a policy that they will not pay fees i.e.- to the hospital, the Ministry of Health for registration fees or any organization to perform these free surgeries. Would you agree with this policy?

Is the hospital prepared to gather and pre register at least 30 cleft lip cases for 1 week of surgery?