



如何營造手術安全文化

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手術安全趨勢

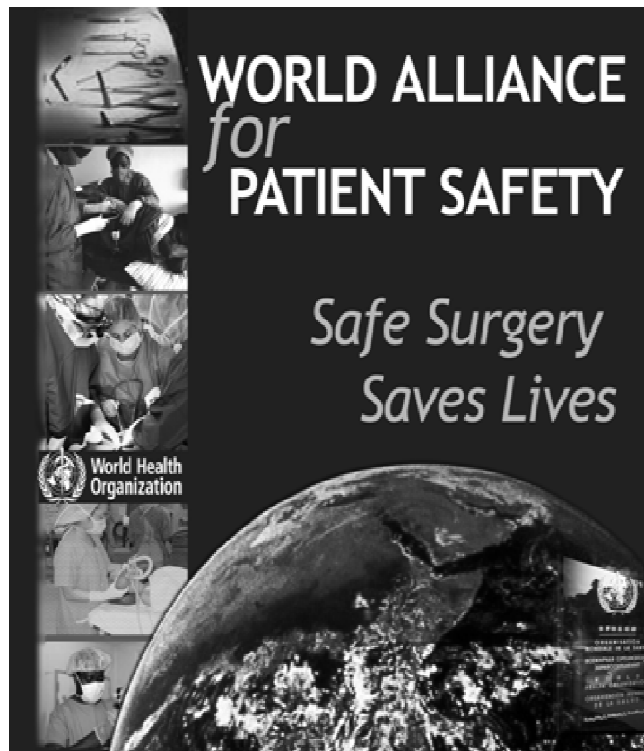
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手術安全現況分析

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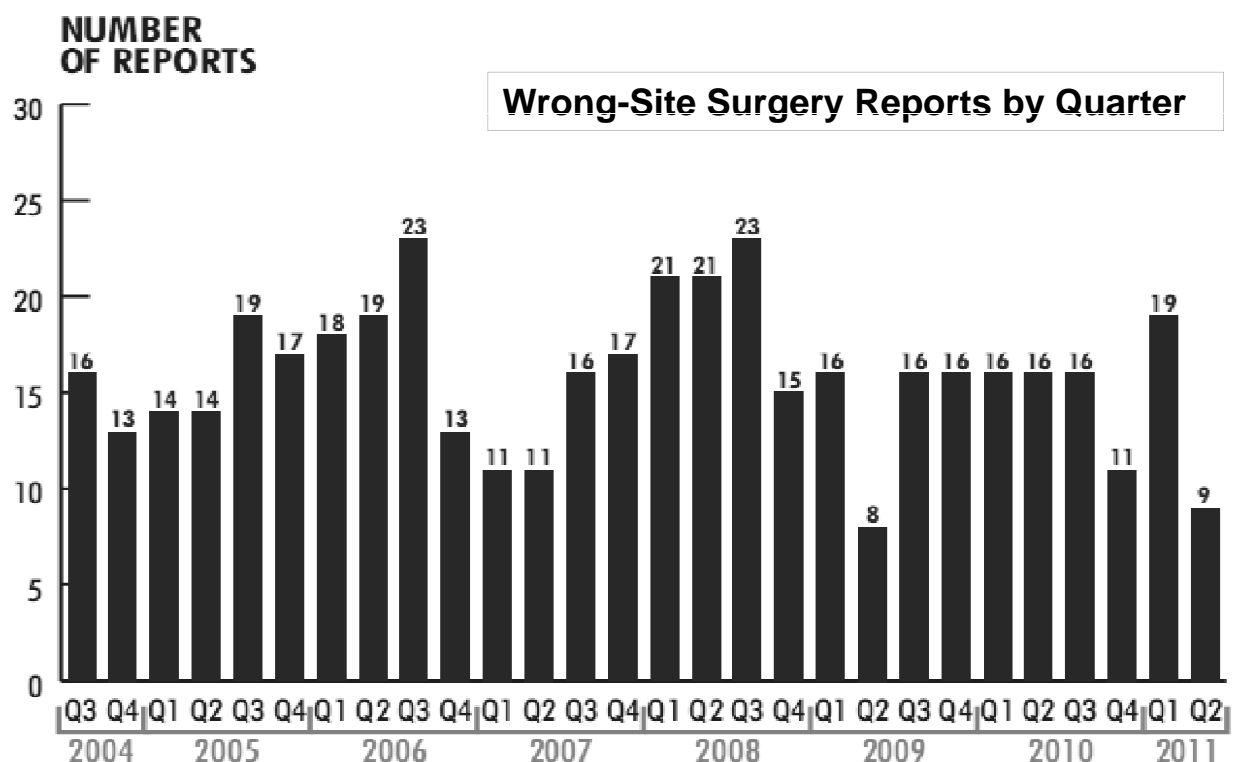
營造手術安全文化

Surgical safety is a serious public health issue

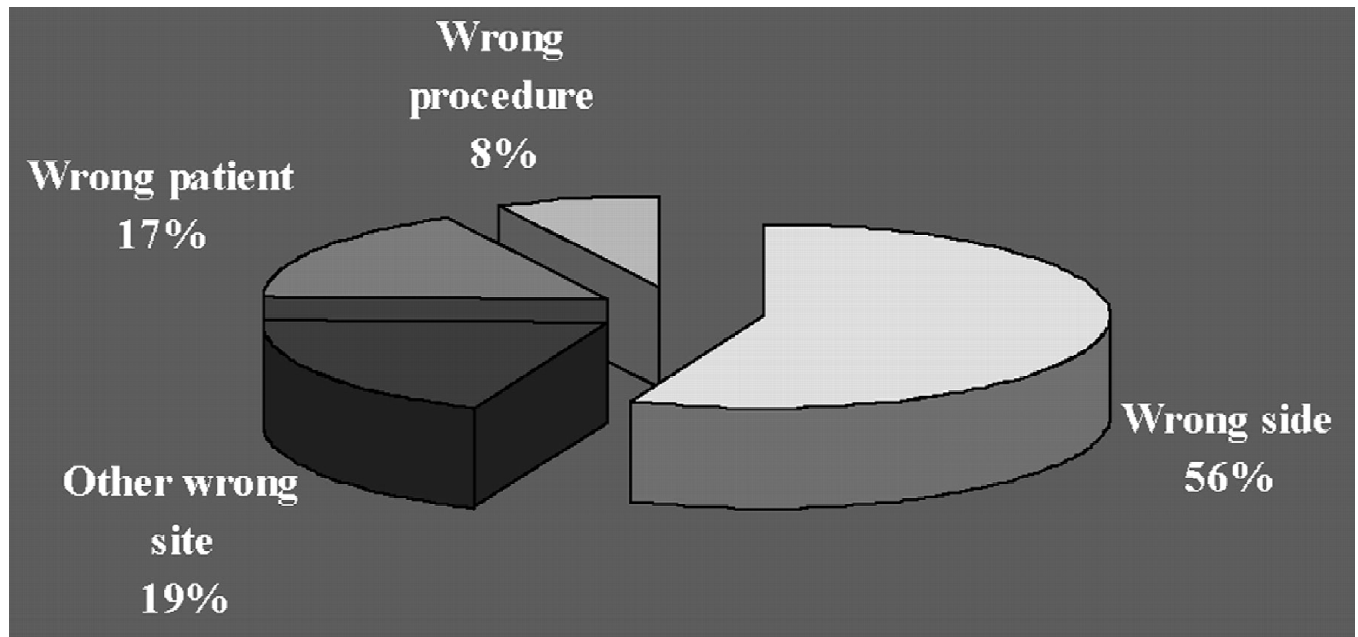


- 234 surgeries globally
- Death 0.4-0.8%
- Complications 3-16%
- 1 million deaths
- 7 million disabling complications

The Pennsylvania Patient Safety Authority



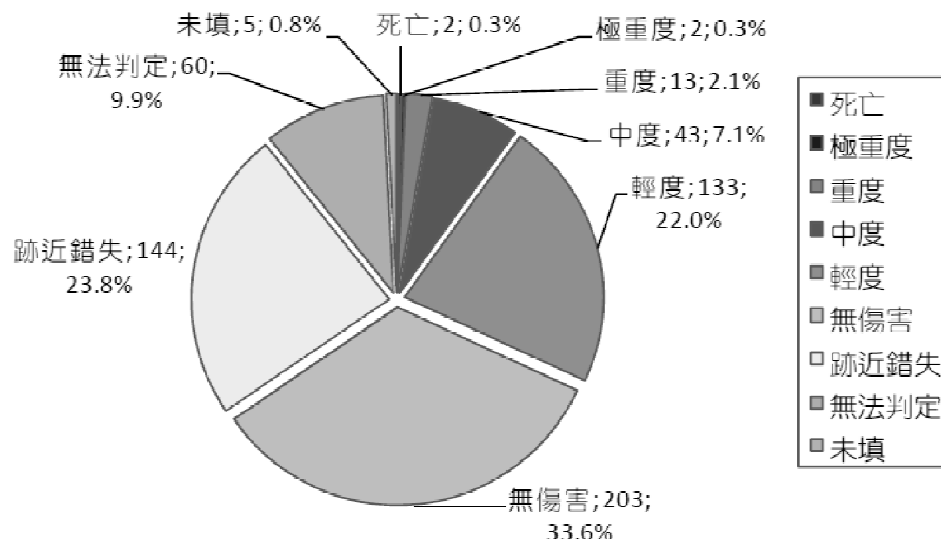
Breakdown of incidents of wrong-site surgery from JCAHO Sentinel Event program of 2006



Bone Joint Surg Am. 2009; 91:1534-1541

台灣病人安全通報

❖ 2010年發生之手術事件共通報636件，其中628件(98.7%)發生於醫院



台灣病人安全通報

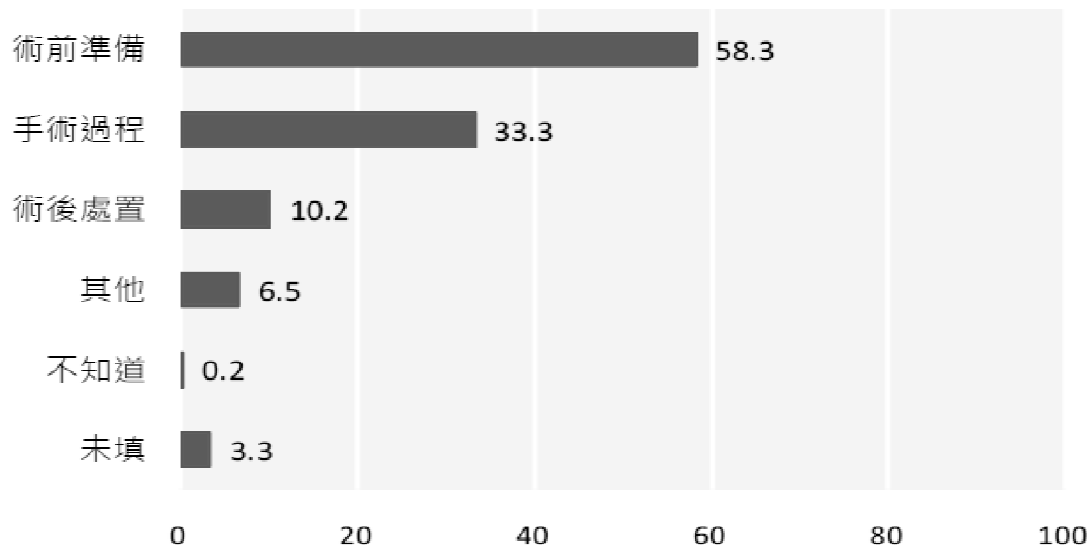


圖 4-8-0-2 醫院手術事件錯誤發生階段相對次數百分比
(N=628, 本項為複選)

http://www.tpr.org.tw/images/pic/files/台灣病人安全通報系統2010年度報表_201106241151.pdf

WHO's Ten Objectives of Safe Surgery

1. **Correct patient / correct site**
2. **Prevent harm from anaesthetics**
3. **Prepare for airway emergencies**
4. **Prepare for high blood loss**
5. **Avoid allergies**
6. **Minimize surgical site infections**
7. **Prevent retention of instruments/ sponges**
8. **Accurately secure and identify specimens**
9. **Effectively communicate critical information**
10. **Establish surveillance of capacity/ volume/ results**

2010~2011年病人安全年度工作目標

❖ 目標三 提升手術安全

■ 落實手術辨識流程

- 落實病人辨識
- 落實手術部位標記及辨識


■ 落實手術安全查核項目

- 提升麻醉照護功能，確保手術安全
- 落實手術儀器設備檢測作業
- 建立適當機制，檢討不必要之手術

(衛生署，2010)

WHO Surgical Safety Checklist

(adapted for England and Wales)



National Patient Safety Agency
National Reporting and Learning Service

SIGN IN (To be read out loud)

Before induction of anaesthesia

Has the patient confirmed his/her identity, site, procedure and consent?
 Yes

Is the surgical site marked?
 Yes/not applicable

Is the anaesthesia machine and medication check complete?
 Yes

Does the patient have a:
Known allergy?
 No
 Yes

Difficult airway/ aspiration risk?
 No
 Yes, and equipment/assistance available

Risk of >500ml blood loss (7ml/kg in children)?
 No
 Yes, and adequate IV access/fluids planned

Name: _____
Signature of Registered Practitioner: _____

PATIENT DETAILS

Last name: _____
First name: _____
Date of birth: _____
NHS Number: _____
Procedure: _____

If this NHS Number is not immediately available, a temporary number should be used until it is

TIME OUT (To be read out loud)

Before start of surgical intervention
for example, skin incision

Have all team members introduced themselves by name and role?
 Yes

Surgeon, Anaesthetist and Registered Practitioner verbally confirm:

What is the patient's name?
 What procedure, site and position are planned?

Anticipated critical events
Surgeon:

How much blood loss is anticipated?
 Are there any specific equipment requirements or special investigations?
 Are there any critical or unexpected steps you want the team to know about?

Anaesthetist:

Are there any patient specific concerns?
 What is the patient's ASA grade?
 What monitoring equipment and other specific levels of support are required, for example blood?

Nurse/ODP:

Has the sterility of the instrumentation been confirmed (including indicator results)?
 Are there any equipment issues or concerns?

Has the surgical site Infection (SSI) bundle been undertaken?
 Yes/not applicable

- Antibiotic prophylaxis within the last 60 minutes
- Patient warming
- Hair removal
- Glycaemic control

Has VTE prophylaxis been undertaken?
 Yes/not applicable

Is essential imaging displayed?
 Yes/not applicable

Name: _____
Signature of Registered Practitioner: _____

SIGN OUT (To be read out loud)

Before any member of the team leaves the operating room

Registered Practitioner verbally confirms with the team:

Has the name of the procedure been recorded?
 Has it been confirmed that instruments, swabs and sharps counts are complete (or not applicable)?
 Have the specimens been labelled (including patient name)?
 Have any equipment problems been identified that need to be addressed?

Surgeon, Anaesthetist and Registered Practitioner:

What are the key concerns for recovery and management of this patient?

Name: _____
Signature of Registered Practitioner: _____

This checklist contains the core content for England and Wales

www.npsa.nhs.uk/nrls

麻醉誘導前 (Sign In)

確認病人資料

- 身分
- 手術部位
- 手術名稱
- 麻醉同意書
- 手術同意書

手術部位已標記

麻醉安全評估已完成

血氧飽和濃度儀已安裝且功能正常

病人是否有：
已知的過敏？

否
 是

發生困難插管或吸入性肺炎的風險？

否
 是，已備有儀器設備或後援。

失血量超過500ml (孩童7ml/kg) 的可能？

否
 是，已備有適當的靜脈注射管道及輸液

劃刀前 (Time Out)

手術團隊成員認識彼此的姓名與角色

手術醫師、麻醉人員及護理人員共同口頭確認病人的：

- 姓名
- 手術部位
- 手術名稱

重要事項評估：

手術醫師：確認有無急迫或非原訂計畫的手術步驟、手術時間及預期失血量。

麻醉人員：確認病人有無應注意之特殊狀況。

護理人員：確認無菌區內所有用物已完成滅菌、器械無異常。

已在劃刀前60分鐘內給予預防性抗生素？

是
 不適用

與手術相關的影像資料已確認。

是
 不適用

病人送出手術室前 (Sign Out)

由護理人員與手術團隊共同口頭確認下列事項：

手術名稱已記錄

手術器械、紗布與針頭清點數量正確（或本項不適用）

手術檢體已正確標記。

有無發生應做後續處理的器械問題。

手術醫師、麻醉人員與護理人員共同確認病人麻醉恢復與術後照護的注意事項



2010年病人安全文化調查-手術室

單位 構面	團隊合作	單位安全風氣	對工作的滿意	對壓力的認知	對管理的感受	工作狀況
手術室	48.7%	43.1%	45.3%	58.1%	42.8%	45.4%

備註：正向回答百分比 (%)

資料來源：醫策會病安文化調查系統

手術安全成功的關鍵在於文化的建立

Promotion A Safety Culture

Human Factors

TRM 教育訓練→營造手術安全文化

❖ 知識(Knowledge)

-

❖ (Attitudes)

-

- 導

❖ 表現(Performance)

-

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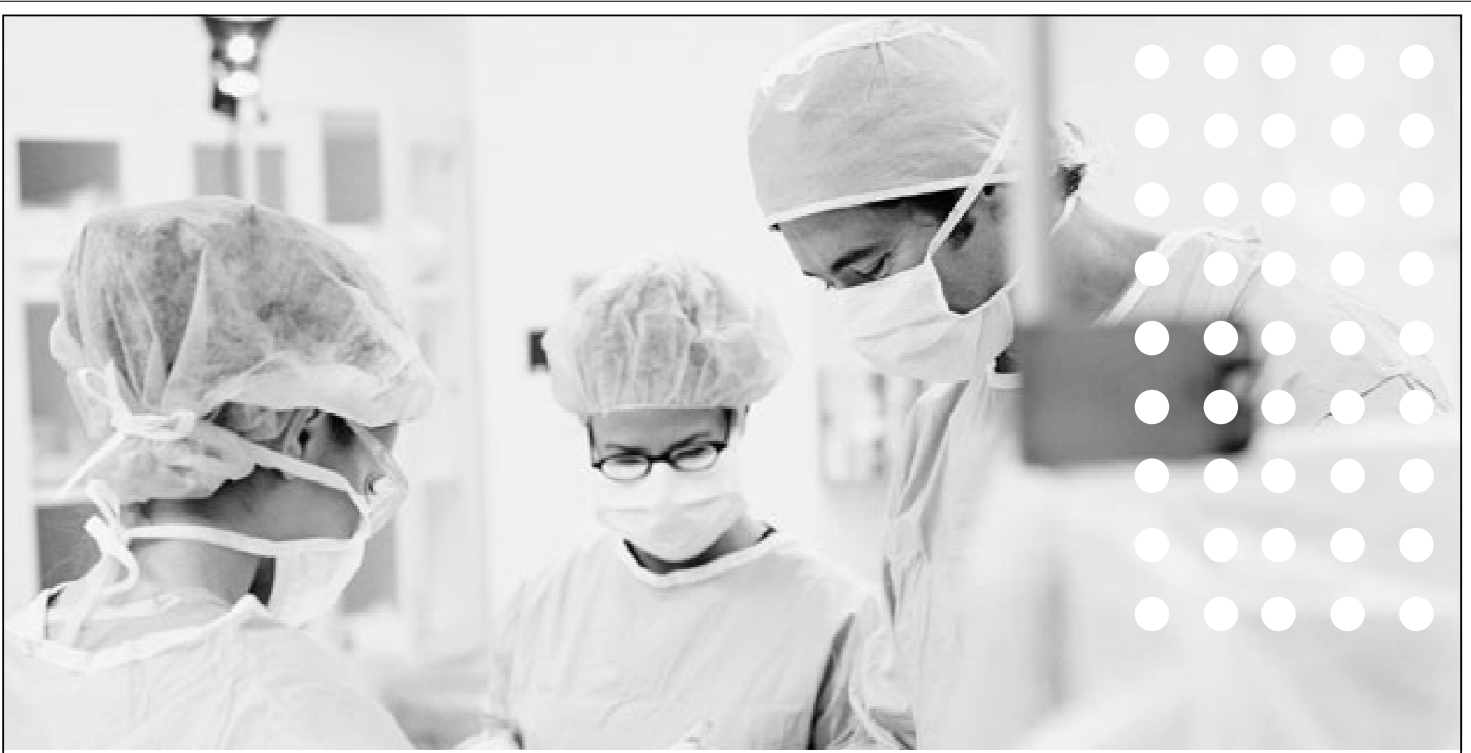
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- 安全





Thank You !

