

# Who's doing what? Understanding and Delineating Roles During an Operating Room Code

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## BACKGROUND

Operating room (OR) codes are high-stress events that demand clear communication and precise role execution by multidisciplinary surgical and anesthesia teams. Recent feedback revealed gaps in staff understanding of roles and responsibilities during these events. This quality improvement project uses the DMAIC framework to identify knowledge gaps, implement targeted training, and improve team readiness and safety during OR code events.

## AIM STATEMENT

Improve staff knowledge of roles and responsibilities during OR codes from 30% to 54% by the end of quarter four 2025.

## DEFINE

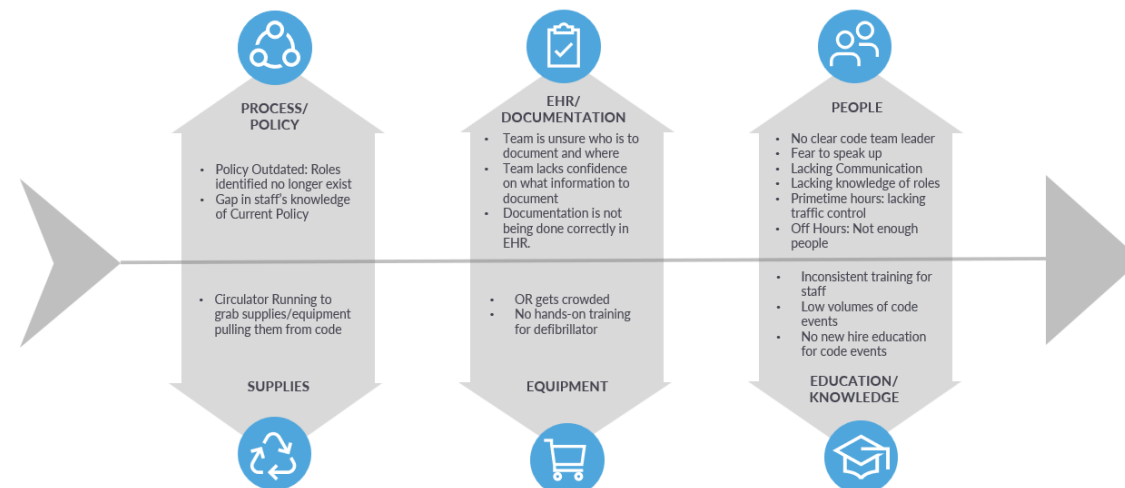
Following an OR code blue debrief, staff feedback revealed confusion and uncertainty about who is responsible for key tasks during a code. This project defined the primary issue as a knowledge deficit regarding clear roles and responsibilities among the multidisciplinary surgical and anesthesia teams during OR codes.

## MEASURE

A comprehensive baseline survey was developed and sent to all Registered Nurses, Surgical Technologists, and Anesthesia providers in the OR. The survey included multiple-choice questions, Likert scale items, and an open-ended response to gauge staff understanding and comfort level with assigned roles during a code. Results showed only 30% of respondents demonstrated clear knowledge of OR codes, confirming the need for targeted improvements.

## ANALYZE

Collected survey data was organized using a fishbone diagram to identify underlying causes of the knowledge gap. Contributing factors included inconsistent education, infrequent practice opportunities, unclear communication protocols, and a lack of OR specific code guidelines. These insights guided the selection of effective, feasible interventions.



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## IMPROVE

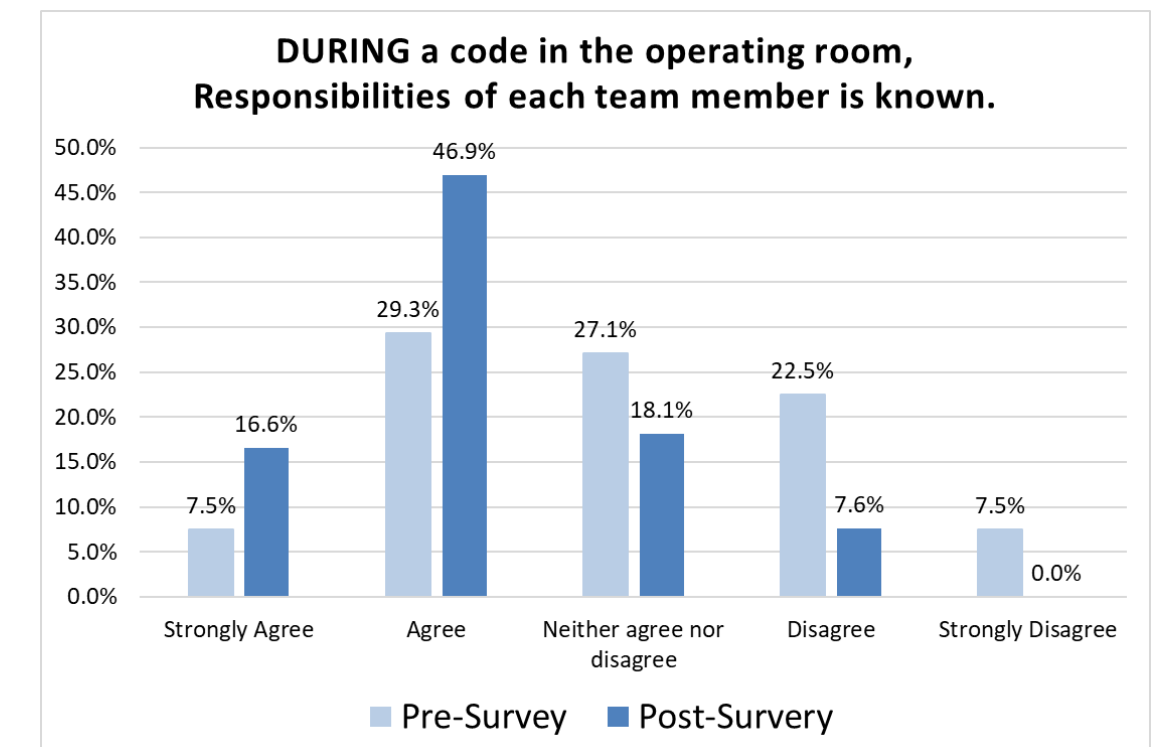
The team prioritized solutions using an impact-effort grid. The resulting action plan includes quarterly OR code role education sessions, creation of OR specific code guidelines, scheduled mock code, structured post-code debriefs, and the reimplementing of MER training to standardize response procedures across all team members.

## CONTROL

To ensure improvements are effective and lasting, a follow-up survey was conducted after interventions were in place. The goal is to increase staff knowledge from 30% to at least 54% by the end of 2025, meeting statistical significance based on a power analysis. Continued education, mock codes, and routine debriefs will support sustained role clarity and teamwork during OR codes.

## CONCLUSIONS

OR codes can create a challenging environment requiring an expansive knowledge level of multidisciplinary roles and responsibilities. This project applied a DMAIC framework to improve nursing knowledge of roles and responsibilities during OR codes. It was identified that inconsistent experience with Code Blue events lead to a gap in knowledge of front-line clinicians. Through routine educational events and training, clinicians experienced an increase in their understanding of roles and responsibilities during a Code Blue in the Operating room.



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## REFERENCES

References available upon request