



# Safeguarding the Surgical Count Process

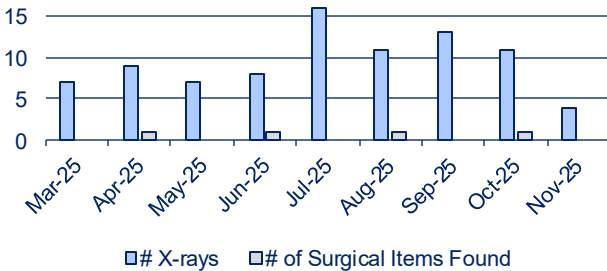
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## Background & Significance

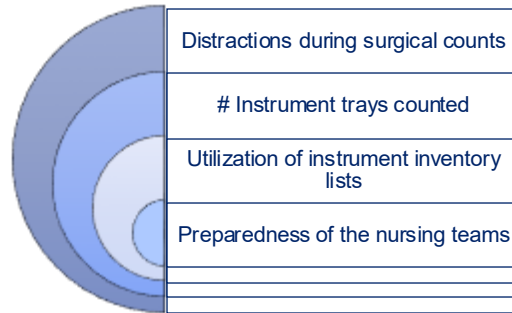
At a Magnet® and NCI-designated Cancer Center, the surgical count policy outlines a high-reliability process of counting surgical instruments and supplies to establish a baseline and prevent retained foreign objects (RFOs). One aspect of this process is to obtain a preventative x-ray in the event of a count discrepancy. From March 2025 to November 2025, 86 preventative x-rays were conducted in the Main Operating Room to resolve surgical count discrepancies. Only 4 surgical items were found.

Preventative X-rays w/ # of Surgical Items Found

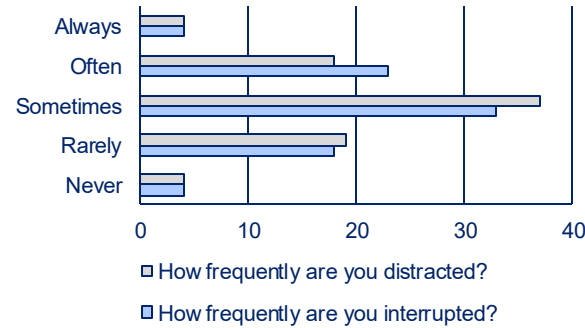


## Assessment

Factors Impacting the Integrity of the Baseline Surgical Count

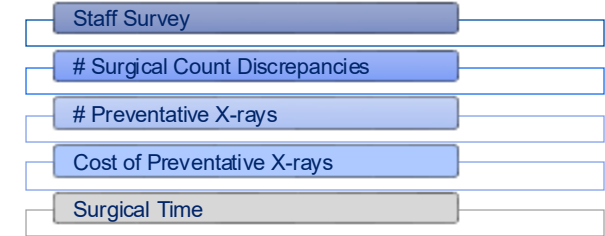


Staff Survey on the Frequency of Distractions & Interruptions During Baseline Surgical Counts



## Next Steps

The post-implementation outcomes metrics include:



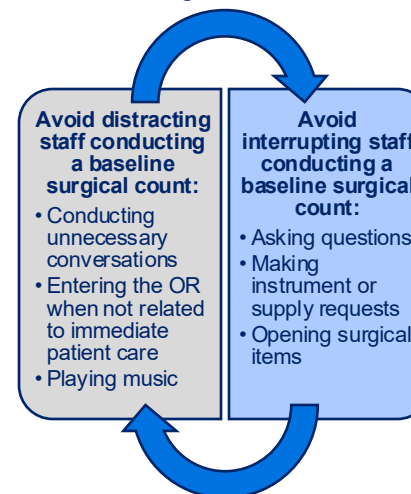
## Intervention

### Establish a "No Interruptions Zone" for the Baseline Surgical Count

#### Circulating RNs & Surgical Technologists

- Avoid delivering items to the sterile field during the count. "Are there any items that need to be delivered to the sterile field before starting the count?"
- Announce the start of the count. "Starting the baseline surgical count."
- Turn off/down the music before starting the count.
- Complete all counts before the patient enters the OR, whenever possible.

#### Non-counting OR Team Members



## Preparation & Planning

The goal of this initiative is to reduce the number of preventative x-rays, using the following strategies:

- Observe baseline surgical counts to determine factors affecting the integrity of the count.
- Review literature on factors impacting the surgical count process and interventions to prevent count discrepancies.
- Develop strategies to reduce surgical count discrepancies and unnecessary preventative x-rays.
- Evaluate the success of the initiative using outcome metrics.

## Implications for Perioperative Nursing

- Discrepancies in surgical counts lead to unnecessary radiation exposure to patients, increased time spent in the operating room to resolve these discrepancies, and increased cost of care.
- By establishing a "No Interruptions Zone" during baseline surgical counts, perioperative leaders provide nursing staff with the tools to prevent surgical count discrepancies, improve the quality of patient care, and reduce hospital costs.

## References

- Saver, C. (2022). Addressing the role of human factors in the retention of surgical items. *AORN Journal*, 116(2), 118–125. <https://doi.org/10.1002/aorn.13748>
- Saver, C. (2022). Retained surgical items: Overview of a persistent problem in health care. *AORN Journal*, 116(2), 111–115. <https://doi.org/10.1002/aorn.13747>
- Weprin, S., Crocerossa, F., Meyer, D., Maddra, K., Valancy, D., Osardu, R., Kang, H. S., Moore, R. H., Carbonara, U., J. Kim, F., & Autorino, R. (2021). Risk factors and preventive strategies for unintentionally retained surgical sharps: A systematic review. *Patient Safety in Surgery*, 15(1), Article 24. <https://doi.org/10.1186/s13037-021-00297-3>