

# Intraoperative case-irrelevant communications by content, initiator, recipient and interference

Mehmet Akif Aydin<sup>1</sup>, Gungor Gul<sup>2</sup>, Yesim Tunc<sup>3</sup>, and Muhammet Fatih Aydin<sup>1</sup>

<sup>1</sup>Altinbas University Faculty of Medicine Medical Park Bahcelievler Hospital

<sup>2</sup>Private Goztepe Hospital

<sup>3</sup>Altinbas University Faculty of Medicine

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## Abstract

**Rationale, aims and objectives:** This study was designed to evaluate intraoperative case irrelevant communications (CICs) by content, initiator, recipient and interference via a real-time operative room analysis. **Method:** The CICs in the operative room across a purposive sample of 52 surgical procedures were evaluated as recorded by a tripod-capable camera in the operative room in this prospective observational study. The CICs were evaluated by initiator, recipient and interference. **Results:** Overall 106 CIC events were recorded across 52 operations (2.03/operation). Most (35.8%) of CICs referred to irrelevant comment by context, while 28.3% of CICs referred to other patients. Individually, external personnel (24.5%) were the most likely initiators of a CIC, while surgical group was most likely initiator (28.3%) of as well recipient (49.0%) of CIC. Overall every CIC interfered with surgical work-flow, by distracting more than one member of the team in 34.9% of cases, only one member of the team in 33.0% of cases and the entire team in 14.1% of cases for a long-term. **Conclusions:** In conclusion, this real-time operative room analysis revealed CICs to be mainly referred to small talk or other patients for case co-ordination and organization, while emphasize the particular role of external staff as the most likely initiator of CICs and operating and assisting surgeons as the most likely initiator and receiver of CICs. Our findings seem to indicate the majority of intraoperative CICs to interfere with surgical work-flow by causing a long-term distraction in at least one member of the operative room team.

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