

Surgical-ANTT[®] After basic precautions and appropriate personal protective equipment are applied, such as hand cleaning and glove use, all the Key-Parts are protected **together** in one main **Critical Aseptic Field**; usually a sterilized drape. Asepsis is maintained during handling of this equipment by the healthcare worker (HCW) wearing sterilized gloves. In Surgical-ANTT, all the equipment within the Critical Aseptic Field is managed as Key-Parts.

NB: Surgical-ANTT is typically performed in an operating room environment for open surgery. However, Surgical-ANTT may also be performed in different settings such as ward bed side, in the patients home etc. for procedures such as urinary catheterisation, a complicated cannulation etc.

Surname:			Forename:		
Job Title:				Ward / Department:	
An Observational Assessment or a Simulation of Practice					
<ul style="list-style-type: none"> ▪ Only assessors with evidence of ANTT[®] competence can assess staff - healthcare worker (HCW) ▪ The assessor must include the theory and practice questions before or during the procedure ▪ This tool allows for assessment of three clinical procedures – if required 					
Competency Assessment (mark all components : ✓ X or n/a)					
Date:	Date:	Date:	Procedure Types (abbreviations)		
Initial:	Initial:	Initial:	Venepuncture – V ; Cannulation – C ; Urinary catheterisation – UC		
Type:	Type:	Type:	Blood cultures – BC ; Simple wound care – SW ; Complex Wound Care – CW		
			Intravenous drug admin./ flush – IV ; Other – O		
			Other Procedures & abbreviations: _____		
ANTT[®] principles & practice terms					
			Pre-Procedure		
			State the three main ways that equipment can be contaminated during aseptic technique		
			State a short definition of the terms a) Sterile b) Aseptic c) Clean		
			State the practice aim of ANTT [®]		
			State the type of invasive procedures ANTT [®] is suitable for		
			State the fundamental practice concept that ANTT [®] is based upon		
			Name the two types of ANTT [®]		
			Explain the type of ANTT you are going to use and why you selected it		
			State some practice variables you've considered when determining the type of ANTT		
			Then state the ANTT Risk Assessment question that selects the type of ANTT		
			Inter-Procedure		
			Ask the practitioner to identify all the procedure Key-Parts of the procedure		
			State the definition of a Key-Part		
			State the definition of a Key-Site		
			State the Key-Part / Key-Site Rule		

Preparation			
			Did the HCW clean their hands prior to equipment preparation?
			Did the HCW open the Critical Aseptic Field (sterilized drape) and equipment onto it without contaminating it?
			Did the HCW clean their hands at the start of the procedure? (If surgery, the hand clean should be a <u>surgical hand scrub</u>)
			Were sterilized gloves used and applied without contaminating them?
			During preparation, did the HCW protect all aseptic equipment on the Critical Aseptic Field by only touching it with uncontaminated sterilized gloves?
			Were sterilized gloves changed if contaminated?
			Was the personal protective equipment (PPE) used appropriate for the procedure?
			Was any indwelling equipment (e.g. Central Line, pacemaker etc. maintained in its protective sterilized packaging until needed?
			Other:
			Other:
Procedure			
			Did the HCW remove or avoid any obvious environmental risks – such as bed making or dusting taking place near the procedure area?
			During the procedure, was all equipment in the Critical Aseptic Field only touched by uncontaminated sterilized gloves? (Non touch technique)
			If equipment was contaminated during the procedure was it removed and replaced appropriately?
			Sterilized gloves were not contaminated (e.g. by coming into contact with the procedure environment outside of the Critical Aseptic Field)
			Were all aseptic Key-Parts prevented from coming into contact with any non-aseptic equipment (e.g. anything outside of the main Critical Aseptic Field)?
			Were the Key-Site(s) protected from touching non-aseptic equipment?
			Were the patients' Key-Site(s) prevented from coming into contact with any non-aseptic Key-Parts?
			Other:
			Other:
Decontamination			
			Did the HCW safely dispose of all sharps, equipment and waste according to local policies?
			Did the HCW clean their hands IMMEDIATELY following glove removal?

Assessors' signature: _____ HCW's signature: _____ Date: _____
 _____ Passed: _____ Failed: _____