





Prevention and Management of Surgical Site infections





Meet the instructors



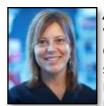
Mirja Nolff DVM, Dipl ECVS Degrees

2007 Doctoral thesis (Dr. med. Vet.) 2012 National Specialization 2018 Diplomate ECVS

Employment: 2006 - 2007 Clinic for Oro- Maxillofacial Surgery, Hannover Medical School

2007-2008 Rotating Internship, Small Animal Clinic, University of Veterinary Medicine Hannover, Foundation

2008 - 2012 Staff Surgeon Small Animal Clinic, University of Veterinary Medicine Hannover, Foundation since July 2012 Staff surgeon (Oberarzt) Clinic for Small Animal Surgery and Reproduction LMU



Augusta Pelosi, DVM, Dipl. ACVS, ACVIM (Cardiology) Graduated in 2000 in Veterinary Medicine (Universita' degli Studi di Pisa), rotating internship at the Cummings School of Veterinary Medicine at Tufts University (2001-2002), small animal surgery residency at Michigan State University (2002-2005), cardiology residency at Michigan State University (2005-2007), Augusta is currently the medical director of the North American Veterinary Heart Center.



Denis Verwilghen, DVM, MSc, PhD, DES, Dipl. ECVS Currently Associate Professor in Equine Surgery at the University of Sydney in Australia, Denis graduated from Ghent University Belgium in 2003, worked in private practice before enrolling in a surgical residency at Liege University in Belgium. After a period as Head of Equine Surgery at Uppsala University in Sweden, Denis ran a private surgery consultancy service the became Associate Professor at Copenhagen University Denis before moving to Australia. Denis has a particular interest in hand hygiene, aseptic procedures and methods for prevention and control of surgical site infections.



Aldo Vezzoni DVM, Dipl ECVS Aldo Vezzoni obtained his Veterinary Medicine degree in 1975 and Small Animal Medicine specialisation degree in 1978, at the University of Milan. Aldo became ECVS Board Certified in Cambridge in 1993 and was President of SCIVAC in 1989-1991 and President of SIOVET 2009-2011. President of the Animal Health Foundation - FSA and Chairman of the FSA Panel for HD & ED Official Control. He is Member of the European Board of AOVET, Secretary of ESVOT and Editor of OrthoVetSuperSite, and is a speaker and author on orthopaedics,

radiology, surgery. His main interests are early diagnosis and treatment of HD & ED, Joint Replacement. Aldo was the recipient of the 2013 ACVS Merit Award in San Antonio, Texas, 24th October 2013.

Start Time	Classes	Lab/ activities	Speaker
8.00 – 8.15	Welcome		
08.15-08.45	Strategies to prevent spread of infectious diseases in my surgical practice		Denis Verwilghen
8.45 – 9.15	Peri-operative pathways of surgical contamination and infection		Aldo Vezzoni
9.15-10.00	Review Surgical team preparation techniques – evidence and practice - Hand hygiene and disinfection - Gowning - Gloving Disposable handling	Gowning, gloving and aseptic techniques	Denis Verwilghen
10.00-10.15	BREAK		
10.15-10.35	Updated patient preparation protocols		Denis Verwilghen
10.35-10.50	Draping and consumable choices: is there cost benefit for single use – procedure packs: some technical notes		BBRAUN expert
10.50-11.10	Instrument reprocessing and maintenance		BBRAUN expert
11.10-11.40	Perioperative Antimicrobial Use		Mirja Nolff
11.40-12.00	Preventing and dealing with Biofilm in wounds and equipment		Mirja Nolff
12.00-12.15	Discussion		ALL
12.15-13.15	LUNCH BREAK		
13.15-13.45	Management of Surgical infections: surgical revisions when and how.		Aldo Vezzoni
13.45-14.00	Case management of orthopedic infections		Mirja Nolff, Aldo Vezzoni
14.00-14.15	Case examples of soft tissue infections management		Mirja Nolff, Augusta Pelosi
14.15-14.30	Introducing Checklists in surgery: is there a benefit?		Aldo Vezzoni
14.30 – 15.30	Surgical Team building: what is it about and how can it have an impact on reducing my complication rates?	Team building activities and separation into groups	Augusta Pelosi
15.30-15.45	BREAK		
15.45 – 16.45	Time, Room flow, briefing and debriefing	Briefing and debriefing	Augusta Pelosi
16.45 – 17.00	Final Remarks and questions		

Focus group

- Primary focus is toward Veterinarians and operating room technicians/nurses
- Veterinary surgeons interested in improving their surgical outcomes and reducing the risk of surgical site infections by reviewing their basic surgical skills knowledge and learn techniques to improve team flow will find the lab quite educative

Number of Participants

- Min 16 – Max 30

Background to the Course

Despite major advances made in the technical aspects of many procedures, Surgical Site Infections remain a major burden on the outcomes of surgical procedures. A veterinary survey on personnel and patient preparation performed in 2013 amongst ACVS & ECVS diplomates revealed that application of accepted guidelines is poor (Verwilghen et al, unpublished). This finding corroborates the findings of a large body of human literature and the single veterinary report¹⁰ and suggests that improving the actual outcomes of procedures lay in anchoring better basic surgical concepts into the procedure. Updating one knowledge on current concepts of aseptic technique, perioperative antimicrobial use and early recognition of surgical infections is key to improving surgical outcomes.

This workshop has three folds: 1. Provide a better understanding of the factors that may lead to the development of surgical site infections in veterinary surgical patients. 2. improve the quality (and quantity) of work in a practice by applying and refining team work techniques. 3. provide a forum for reviewing and standardize basic surgical skills training;

Further this workshop will provide techniques focused on OR team work. Team efficiency, which implies strong coordination and teamwork efforts, has been shown to increase productivity, enhance employee and client satisfaction and are therefore essential items in any veterinary practice. Team building activities performed regularly have been shown to significantly decrease errors and improve the employee performance.

Over the last few years, a large body of literature has flourished to prove the importance and establish operating surgical skills standards as part of the training of human surgeons, surgical residents and the OR teams.¹ In parallel, alternative learning resources (like simulation laboratories) have been explored in order to enhance and accelerate the learning process for surgical residents.²

This lab aims at improving surgeons and the surgical teams knowledge and skills around prevention of surgical site infections and improving outcomes also by increasing communication and planning skills.

Some literature

- 1. Perry RE. Laying the foundation of surgical skills for trainees (Residents). ANZ Journal of Surgery 2009;79(3):122-126.
- 2. Nagendran M, Gurusamy KS, Aggarwal R, et al. Virtual reality training for surgical trainees in laparoscopic surgery. Cochrane database of systematic reviews (Online) 2013;8:CD006575.
- 3. Beard JD, Marriott J, Purdie H, et al. Assessing the surgical skills of trainees in the operating theatre: a prospective observational study of the methodology. Health Technol Assess 2011;15(1):i-xxi, 1-162.
- 4. Grantcharov TP, Reznick RK. Training tomorrow's surgeons: what are we looking for and how can we achieve it? ANZ Journal of Surgery 2009;79(3):104-107.
- 5. Scott DJ, Dunnington GL. The new ACS/APDS Skills Curriculum: moving the learning curve out of the operating room. J Gastrointest Surg 2008;12(2):213-221.
- 6. SCORE: Surgical Council on Resident Education. http://www.surgicalcore.org/. Accessed August 29, 2015.
- 7. Sachdeva AK, Bell RH, Jr., Britt LD, et al. National efforts to reform residency education in surgery. Acad Med 2007;82(12):1200-1210.
- 8. Cogbill TH, Malangoni MA, Potts JR, et al. The general surgery milestones project. J Am Coll Surg 2014;218(5):1056-1062.
- 9. Chipman JG, Schmitz CC. Using objective structured assessment of technical skills to evaluate a basic skills simulation curriculum for first-year surgical residents. J Am Coll Surg 2009;209(3):364-370 e362.
- 10. Anderson M., Foster BA, Weese JS. Observational study of patient and surgeon preoperative preparation in ten companion animal clinics in Ontario, Canada. BMC Vet Res. 2013 Oct 5;9:194