

form “OR-S”
Lansford



QR for online color
version. Select
Form “OR-S”

Rhinoplasty (aka open approach
to repair nasal vestibular stenosis
or nasal deformity)

With or without:

- **Septoplasty**
- **Turbinate reduction**
- **Conchal cartilage graft**

👉 **Preferences, Pick Sheet, and “Anything
Special?”**

**May be combined with sinus surgery—refer to form
“OR-S”**

Color code:

Surgeon
Anesthesia
Circulating Nurse
Scrub Tech
Surgical Assistant

Pre-op

Surgeon signs chart, and reviews his own consent form with patient and a witness **prior to** administration of an anxiolytic or other medication rendering a patient incompetent to sign. Minors may receive an anxiolytic prior to the surgeon’s consent since they are not signing.

Prep Tray

1% lidocaine with 1:100,000 epinephrine
1 bottle of cocaine

1 bottle of oxymetazoline/Afrin
Bacitracin ointment- very small amount
Regular (not fine) skin marking pen
Control syringe
27 gauge 1.5" hypodermic needle
2 small Tegaderms for eyes
Six 1/2" x 3" cottonoids (cut string off)
Bayonette Forceps
Kerlix
Sweetheart tongue retractor (or tongue blade)
Curved iris scissors
Large non sterile glove pair

Instruments & Supplies

At TCOM, "ENT Plastic Tray" and "Plastic pack" and "Ortho Pack"
Mayo cover
Size 8 Sensicare gloves (single pair)
XL gown for surgeon
Mupirocin cream (if doing septoplasty)
Head ring (gel preferred)
Headlight
Septoplasty/Turbinates tray
Cartilage morselizer /crusher and mallet
Osteotome (3 mm or 4 mm usually) and mallet (if doing septoplasty)
Cottle elevator
Tenotomy scissors (may need peel-pack)
Swivel knife (if doing septoplasty)
Nasal speculums- start with smallest, move to longer and narrower
Jansen Middleton double action slotted punch (if doing septoplasty)
Suction monopolar cautery (if doing turbinates)
Jeweler bipolar tip, guarded
#7 knife handle (if doing turbinates)
#15 scalpel blade
Left and Right turbinate endoscissors (if doing turbinates)
Small Takahashi
Bayonette forceps
Toothed Adson forceps
Brown-Adson forceps
Boise elevator ("butter knife") (if doing turbinates)
Fred and Two sloppy wet Ray-Tec sponges on a folded towel to the right of the head (if doing turbinates)
60 mL syringe (available in room)
Doyle splint (pair) (if doing septoplasty)
4-0 Chromic P3 (if doing septoplasty) x1
4-0 Plain Gut SC-1 (if doing septoplasty) x1 (x2 if doing conchal cartilage graft)
3-0 Prolene (if doing septoplasty) x1
5-0 Monocryl P-3 (Y493) x1
4-0 PDS clear on P-3 (2494) x 3
6-0 Prolene (blue) P-1 (86976) x1
5-0 Prolene (blue) P-1 x 1 (if doing conchal cartilage graft)
Mastisol

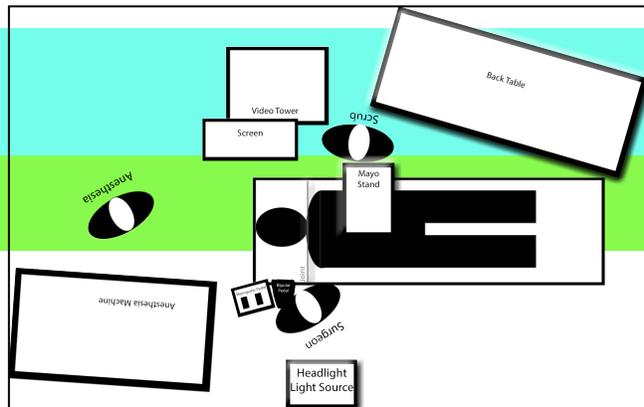
1/2" steri strips
 Thermal splint for nose (large)
 2 suction tubings
 30 gauge 1/2" hypodermic needle
 Towels
 Split sheet

Equipment

0 degree rigid sinus scope (if doing turbinates)
 Bovie set to 15 coag
 Video Tower by patient's left shoulder (if doing turbs) -see diagram
 RAE tube (preferred, not essential)

Patient in Room to Induction

Antibiotic.
 Patient supine
 Tape endotracheal tube securely at left side of mouth without distortion of nose
 SCDs functioning before induction
 Tuck or papoose right arm- no arm board (left arm may be on arm board)



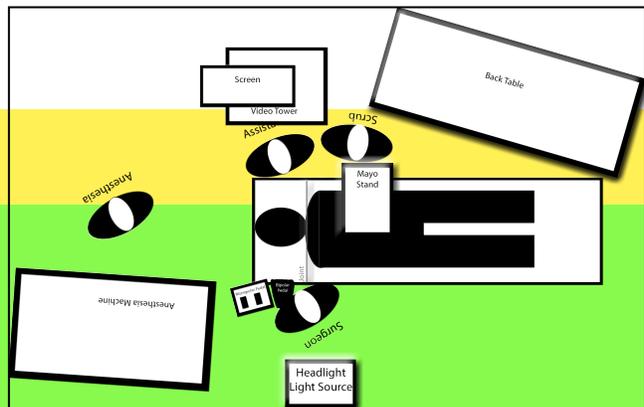
Configuration for Turbinates and Septoplasty

From Induction to Start

Reverse Trendelenburg about 20°, table up to surgeon's elbows
 No bed turning needed
 Surgeon will place tegaderms over eyes
 Surgeon will apply cocaine and/or oxymetazoline topically, inject epinephrine 1:100,000

3 towels over face (surgeon places)
 Large Split drape/"U" drape (surgeon places)

Betadine paint
 Bovie set up- 15 cut, 15 coag, 15 bipolar; Petal to surgeon's feet
 No need for Foley for routine case
 Ground lead placement for Bovie (if doing turbinates)
 Bovie and bipolar petals by surgeon's feet



Configuration for Rhinoplasty

Mid Operation

Music and background discussion quiet, please.

Mild hypotension, such as SBP ~105 mmHg, if tolerated.

Save septum bone and cartilage in saline to morselize and replace into septal space

Closing

Small amount of mupirocin cream (not ointment) to field.

Smear mupirocin cream on flat surface of Doyles (if doing septum)

Hot water for thermal splint: Use a coffee mug and microwave.

BSS for eyes

Emergence to Patient Exit

Elevate HOB

Apply nasal drip pad

OK to give 2-4 sprays of Afrin in each nostril if hypertension causes epistaxis.

Thank you for reading this!