

form “OR-Z” Lansford Thyroidectomy

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



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

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.

Room preparation

Extension airway circuit tubing

No paralysis during case

Head ring (gel preferred)

Shoulder roll (gel preferred)

Table with adjustable head rest (flexion/extension)

Prep Tray

1:100,000 epinephrine **without** lidocaine (0.1 mL of 1:1000 epinephrine in 9.9 mL injectable saline, mixed, with 1.5” 27 ga hypodermic needle).

Instructions on how to make this at <https://www.doctorlansford.com/how-to-make1-100k-epinephrine> or use the QR code to the right -->

Regular (not fine) skin marking pen

Betadine prep (surgeon will apply the prep)

Medium point violet marking pen



Instruments & Supplies

At TCOM, “ENT Plastic Tray” and “Plastic pack”

Small Metal Andrews Yankauer

2 medium jointed Weitlaner

Toothless Adson forceps

2 Stilles toothed forceps

Army-Navy
 Guarded blade Bovie tip 0012M
 Guarded Jeweler bipolar hand piece and cord
 15 scalpel blade
 2-0 silk sutures, SH pop-off L0120 x 4
 3-0 Vicryl, SH x 2
 4-0 Monocryl, PS-2 x 1
 5-0 Prolene, P-3 x 1
 Kitner x 1 pack
 Ray-Tecs
 Magnetic instrument mat
 Harmonic scalpel, cord and hand piece
 Stapler
 Size 8 Latex free Sensicare gloves for surgeon
 XL gown for surgeon
 #10 Blake channel drain + bulb (available, unopened)

Equipment

Headlight

NIM monitor and leads. (YouTube video for Medtronic NIM Vital at DoctorLansford.com, then "Resources" menu, choose colleague resources, then choose "How To Guide" OR use this QR code
 ----->



Harmonic Scalpel, monopolar and bipolar cautery

NIM ETT. Generally size 8 for adult males, size 7 for adult females
 Pediatric extension tubing in preparation for turning table

Patient in Room to Induction

Antibiotics, if ordered.

OR table with articulating head support at head
 Patient's head at the tippy-top of the OR table
 Gel shoulder roll (for most pts) placed prior to induction

SCDs functioning before induction

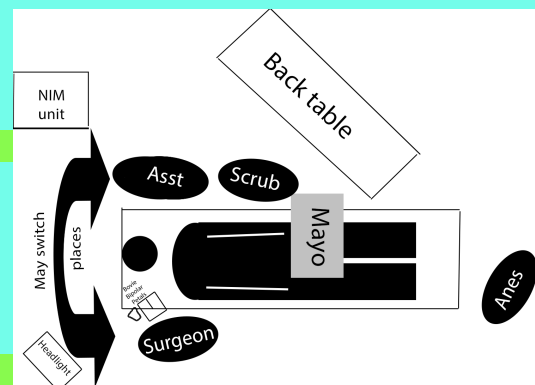
Use glide scope or equivalent for nerve monitoring
 ETT placement-surgeon would like to view placement

Tape tube securely

Extension for circuit tubing

Christmas tree for circuit tubing

Ground lead placement and NIM plug-in (Video on [Medtronic NIM Vital setup](#))



From Induction to Incision

No paralysis during case.

OR table turned 120-180°

Reverse Trendelenburg about 20°, table up to surgeon's elbows

Tuck or papoose arms- no arm board
Electrocautery- 15 cut, 15 coag, 15 bipolar; petals by Dr's feet.
Harmonic Scalpel hookup
Suction
No need for Foley for routine thyroidectomy, but I defer to anesthesia
Ground lead placement and NIM plug-in
Marking pen-medium tip
Surgeon will inject epinephrine 1:100,000 prior to prep
Surgeon will prep and drape
Towels x 4 and staples
Split sheet

Mid Operation

Mild hypotension, such as SBP ~105 mmHg, if tolerated.
Music and background discussion quiet, please.
Possible frozen section for left or right "parathyroid candidate"
Notify pathology in advance and at time of phlebotomy for rapid parathyroid hormone (intact) assay

Closing

Verify if any unlabeled tissue is to be discarded versus sent as specimen.
Drain may or may not be used – ask MD.
Bacitracin, Xeroform strip, Telfa, medium Tegaderm for dressing.

Emergence to Patient Exit

Surgeon may perform flexible fiberoptic laryngoscopy (with a flexible laryngoscope) after extubation when patient is following commands. (Ask)