

# Surgery Setup Checklist

ACTIVITY	STATUS	RESPONSIBLE	COMMENTS
Please consult the documentation for surgery for details on how the various files should be set-up.			
1. Surgery Package Management			
A. Surgery Site Parameters (Enter/Edit): Allows for multidivisional parameter set up. As soon as you set up more than one division(s), Surgery system users will be asked for a division when they enter the Surgery package.			
1) Mail Code for Anesthesia:			
2) Cancel IVs:			
3) Default Blood Component:			
4) Chief's Name:			
5) Lock After How Many Days:			
6) Request Deadline:			
7) Schedule Close Time:			
8) Nurse Intraop Report:			
9) Cardiac Assessment in Use (Y/N):			
10) Ask For Risk Preop Info:			
11) PCE Update Activation Date:			
12) Surgical Residents (Y/N):			
13) Required Fields for Scheduling: (Multiple)			
14) Request Cutoff for Sunday:			
15) Request Cutoff for Monday:			
16) Request Cutoff for Tuesday:			
17) Request Cutoff for Wednesday:			
18) Request Cutoff for Thursday:			
19) Request Cutoff for Friday:			

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20) Request Cutoff for Saturday:			
21) Holiday Scheduling Allowed: (Multiple)			
22) Inactive?:			
23) Automated Case Cart Ordering:			
24) Anesthesia Report in Use:			
25) Default Clinic for Documents:			
26) Code Issue Mail Group:			
<p>B. Operating Room Information (Enter/Edit): Operating rooms will need to be entered into the system's HOSPITAL LOCATION (#44) File and assigned the type of OPERATING ROOM. The OPERATING ROOM (#131.7) File then needs to be updated with the operating rooms. (Use FileMan to enter the rooms and then use the surgery option, Operating Room Information (Enter/Edit), to enter the necessary data).</p>			
C. Surgery Utilization Menu: Update the following information:			
1) Operating Room Utilization (Enter/Edit)			
2) Normal Daily Hours (Enter/Edit)			
D. After the New Person file is set-up, the following need to be updated:			
<p>1) Person Field Restriction Menu: Update the Surgery Person Field Restriction information for users that will have access to restricted fields. (You may need to add Surgery keys.) NOTE: This must be done or users will be prevented from using the restricted fields. See the VistA Surgery User Manual for further information.</p>			
2) Update Staff Surgeon Information:			
3) Mail Groups:			
a) SR-QUARTERLY			
b) RISK ASSESSMENT			

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c) CODE ISSUE MAIL GROUP			
E. Update OR Schedule Devices: Enter the names of the printers where the Schedule of Operations should print for that Division.			
F. Follow-up letters are not printed by division so they must be agreed upon between divisions.			
G. Flag Drugs for Use as Anesthesia Agents: Prior to being able to flag drugs used as anesthesia agents, pharmacy drug files must be completed. Pharmacy is responsible for completing these files. Surgery is responsible for marking the drugs for use as anesthesia agents.			
H. Update the input templates for entering surgical data if necessary.			
I. Update Site Configurable Surgery Files: These files are not division-specific files.			
1) Surgery Transportation Devices			
2) Prosthesis			
3) Surgery Positions			
4) Restraints and Positional Aids			
5) Surgical Delay			
6) Monitors			
7) Irrigations			
8) Surgery Replacement Fluids			
9) Surgery Cancellation Reasons			
10) Skin Prep Agents			
11) Skin Integrity			
12) Patient Mood			
13) Patient Consciousness			
14) Local Surgical Specialty			

ACTIVITY	STATUS	RESPONSIBLE	COMMENTS
15) Electroground Position			
16) Surgery Disposition			
2. Reports: Most surgery reports are multidivisional reports.			
3. Keys: These need to be reviewed for appropriateness and functionality changes.			
4. Laboratory Changes: The following files interact with the Surgery Package:			
A. Topography Field (#61) File			
B. Lab Data (#63) File			
C. Blood Products (#66) File			
5. Pharmacy Changes: The following file interacts with the Surgery Package:			
A. Drug (#50) File			
6. CPT/ICD Diagnosis Changes - The following files interact with the Surgery Package:			
A. ICD Diagnosis (#80) File			
B. CPT (#81) File			
7. Surgical Risk Assessment			
A. For risk assessment, the Risk Model Lab Test file (139.2) needs to be reviewed and updated to include any lab tests that will be needed.			

Appendix: The files that must be set-up for Surgery to function are listed below: Files in the Surgery number space (130-139.9) should be discussed.

<b>File #</b>	<b>File Name</b>
2	PATIENT
4	INSTITUTION
5	STATE
44	HOSPITAL LOCATION
50	DRUG
61	TOPOGRAPHY
66	BLOOD PRODUCT
131.01	SURGERY TRANSPORTATION DEVICES
131.6	SURGERYDISPOSITION
131.7	OPERATING ROOM
132	SURGERY POSITION
132.05	RESTRAINTS AND POSITIONAL AIDS
132.4	SURGICAL DELAY
132.8	ASA CLASS
132.95	ANESTHESIA SUPERVISOR CODES
133.4	MONITORS
133.6	IRRIGATION
133.7	SURGERY REPLACEMENT FLUIDS
135	SURGERY CANCELLATION REASON
135.1	SKIN PREP AGENTS
135.2	SKIN INTEGRITY
135.3	PATIENT MOOD
135.4	PATIENT CONSCIOUSNESS
136.5	PREOPERATIVE OCCURRENCE CATEGORY
137.45	LOCAL SURGICAL SPECIALTY <i>If there exists an associated clinic for the site, the local surgical specialty has to be set up site with the correct associated clinic. This is a requirement for PCE workload.</i>
138	ELECTROGROUND POSITIONS
200	NEW PERSON
723	MEDICAL SPECIALTY