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Best Practices to ensure Patient Safety under Anesthesia

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Anesthesiology and surgery are becoming safer with the advent of new technologies, safe anesthetics and implementation of monitoring standards and safety checklists in the operating room, but many factors in OR lead to a high incidence of errors rate; those can be divided into systemic and personal factors. Systemic or environmental factors like complex working conditions, lack of leadership support, lack of personnel, overtime , information flow, workload , are common factors related to medical and paramedical personnel exposing the OR environment to life threatening errors at one point of the surgical process. Personal or human factors as lack of team work, poor communication, carelessness, fatigue, and competing tasks have a negative impact on team performance affecting thus patient safety. Human performance is the result of cognitive ability (innate ability or aptitude) and psychomotor skill (acquired by training), which determines safe and optimal execution of special tasks requiring dexterity and eye-hand coordination in special specialties as surgery and anesthesiology. The process of risk management in Anesthesiology starts by transparent error reporting and a thorough retrospective root cause analysis to identify the factors that led to a wrong situation, this approach is not robust as it does not analyze important information as dilemmas, uncertainties, and demands, which were present at the time of the event and disturbed the practitioner involved. The identification of all factors has a positive effect on teaching and on preventing recurrence. The way an organization responds to disasters and adverse events affects the mode of care delivery by providers. Many steps can be taken to improve patient safety in the operating room set-up; improving providers' proficiency, better access to medical information technology, use of checklists and standardization of practices... Human factors engineering strengthens the relation between humans and systems. Behaviors, abilities, skills and limitations need to be studied and re-designed because Medical Error cannot be allowed to be a human error anymore.

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