Dear Chief Executive Officer:

The incidence of wrong patient, wrong site/side and wrong invasive procedures continues to occur with alarming frequency. Although initially considered relevant to the operating room, wrong patient, wrong site/side and wrong invasive procedures occur at least three times more frequently outside the O.R. according to evidence based information collected by the New York Patient Occurrence Reporting and Tracking System (NYPORTS).

In January of 2006, a panel of statewide and national experts convened to review the available data from NYPORTS and to assess the continued incidence of wrong patient, wrong site/side and wrong invasive procedures. The Panel considered the recommendations of the Pre-Operative Protocols for Hospitals, Ambulatory Surgery Centers and Individual Practitioners shared by the NYSDOH in January 2001, and the Joint Commission on Accreditation of Healthcare Organizations' Universal Protocol published in 2003. A revised protocol was developed using these documents as a starting point and incorporating current, relevant medical literature, documented lessons learned from actual occurrences submitted to NYPORTS and the collective expertise of the twenty six-member panel.

The New York State Department of Health is instituting this new protocol to assure that the correct invasive procedure or surgery is performed on the correct patient at the correct site or side. The New York State Surgical and Invasive Procedure Protocol (NYSSIPP) for Hospitals, Diagnostic and Treatment Centers, Ambulatory Surgery Centers and individual practitioners becomes effective on March 1, 2007 is an expected minimum standard of care for all Article 28 facilities. It may be added to or enhanced to meet individual specialty needs and circumstances.

As we are increasingly aware of the fact that invasive procedures are performed throughout a facility and are not limited to the operating room, it is expected that these measures be utilized in all areas of a facility where invasive procedures or surgery are performed (including - but not limited to - special procedure room, bedside, radiology, emergency room and intensive care units).

It is imperative that we work together in a standardized fashion to address this preventable event. We firmly believe that this initiative will enhance patient safety and reduce medical and surgical errors.
Questions may be directed to: Peg Dameron, Division of Primary and Acute Care Services, at mmd04@health.state.ny.us or (518) 402-1003. The New York State Surgical and Invasive Procedure Protocol (NYSSIPP) is available on the Department of Health website: http://www.health.state.ny.us/professionals/protocols_and_guidelines/surgical_and_invasive_procedure/docs/protocol.pdf. Thank you for your cooperation in this very important matter.

Sincerely,

Martin Conroy
Director
Division of Primary & Acute Care Services