



DEPARTMENT: POLICY NUMBER:

Nursing Services Division DPOTMH-MPP-SURGSTE-P001-(01)

TITLE/DESCRIPTION:

SKULL FLAPS - RETRIEVAL, STORAGE, RE-IMPLANTATION, DISCARDING

EFFECTIVE DATE: REVISION DUE: REPLACES NUMBER: NO. OF PAGES: 1 of 9

September 13, 2024 | September 12, 2027 | N/A

APPLIES TO: Surgical Suites Staff Nurses, POLICY TYPE: Multi Disciplinary

**Resident Doctors, Neurosurgery Consultants** 

### **PURPOSE:**

Provide clear guidance for RMCI Surgical Suites staff to follow to ensure safe storage, accurate recording and monitoring of skull flaps.

### **DEFINITIONS:**

**Craniotomy / Craniectomy** – the surgical removal of part of the bone from the skull to expose the brain.

Skull Flap – the section of the bone from the skull which was removed during craniotomy/ craniectomy

**Cryopreservation** – is a process where biological material – cells, tissues, or organs – are frozen to preserve the material for an extended period of time.

### **RESPONSIBILITY:**

Surgical Suites Staff Nurses, Neurosurgeons, Resident Doctors

### POLICY:

- 1. Skull flap is to be collected and prepared aseptically.
- 2. Skull flap container (sterile zip-lock bag) shall be properly labeled.
- 3. Skull flaps shall be stored in a bone freezer through the process of cryopreservation (temperature is at -23 to -80 degrees celsius). A log folder shall be filled up upon storage and retrieval.
- 4. Storage of skull flaps shall not exceed more than 6 months (recommendation of Neurosurgeons)
- 5. Retrieval of skull flap for re-implantation shall be communicated to the charge nurse at least 24 hours prior to scheduled re-implantation procedure.
- 6. Strict daily monitoring of freezer temperature shall be done by the 6am-2pm shift charge nurse.
- 7. Weekly monitoring and outdating of flaps shall be strictly observed.
- 8. Expired skull flaps shall be communicated to the neurosurgeon prior to discarding.
- 9. Expired skull flaps shall be treated as infectious waste.
- Skull flaps of deceased patients may be discarded automatically upon confirmation with the neurosurgeon.





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APPLIES TO: Surgical Neurosurgery Consul	Suites Staff Nurses tants, Resident Doctors	POLICY TYPE: Mult	ti Disciplinary	

### PROCEDURE (SOP):

### RETRIEVAL

- 1. Circulating nurse confirms the need for storage.
- 2. Skull flap is handled aseptically.
- 3. Scrub personnel dries the skull flap using sterile gauze.
- 4. Scrub personnel places the skull flap in a sterile zip-lock bag which is then placed in a second sterile bag.
- 5. Scrub personnel hands in the bag to the circulating nurse for labeling.
- 6. Circulating nurse properly labels the zip-lock bag using the Skull Flap Card (see Form A) with the following data:
  - a. Patient's Complete Name (Last Name, First Name, Middle Name)
  - b. Patient's Date of Birth (as an additional identifier)
  - c. Name of Neurosurgeon
  - d. Date of collection
  - e. Name and Initial of Nurse in charge
- 7. Circulating nurse places the card in an unsterile zip-lock bag (to prevent it getting wet) and securely tapes it to the second zip-lock bag.
- 8. Circulating nurse immediately places the specimen in the freezer and fills up the log folder.

### RE-IMPLANTATION

- 1. Neurosurgeon calls Surgical Suites Charge Nurse to schedule the procedure.
- Once confirmed, the charge nurse retrieves the record of skull flap and assesses the specimen to confirm information.
- On the day of surgery, the circulating nurse removes the skull flap from the freezer and thaws at room temperature for at least an hour pre-operatively. (Can also be thawed on a sterile setup in warm Ringers Solution if required by the neurosurgeon)
- Circulating nurse records the date of removal from the freezer and puts the initial in the log folder.
- Circulating nurse opens and peels the two outer zip-lock bags and serves the skull flap to the scrub personnel aseptically.





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Neurosurgery Consultants, Resident Doctors

### **DISCARDING OF EXPIRED SKULL FLAPS**

- Once confirmed beyond 6 months, the charge nurse informs the neurosurgeon to notify of expiration.
- Once with approval, the charge nurse removes the expired skull flap from the freezer and places it in a yellow plastic bag. If the surgeon disagrees with the disposal, he/she should write a signed justification note.
- 3. Charge nurse labels the yellow bag with "bone tissue" and disposes it in an infectious waste bin.
- Charge nurse fills in the log folder, signs initial, and indicates reason for removal (beyond storage period).





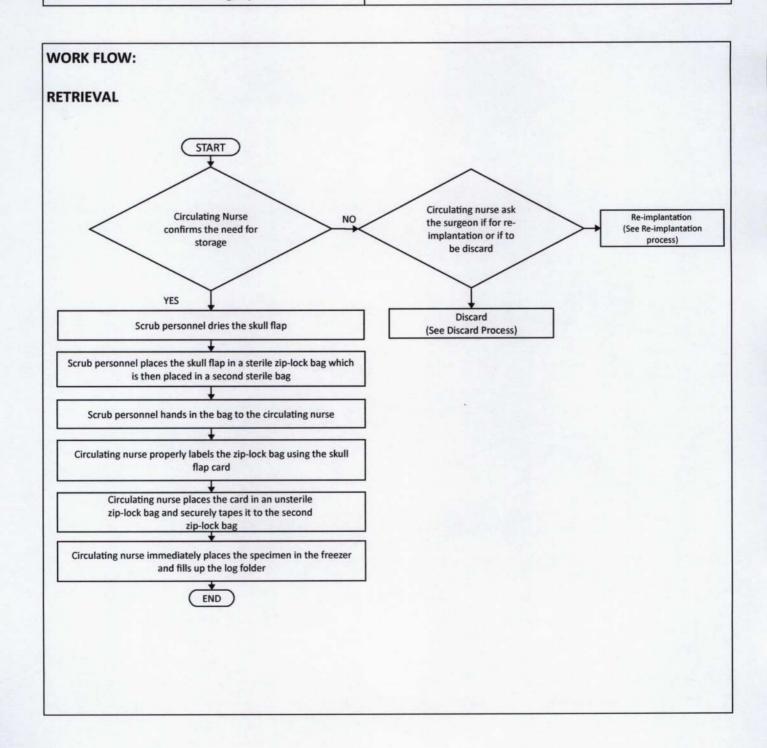
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KEY TASK	PERSON RESPONSIBLE	
Confirms the need for storage of skull flap.		
2. Secures, labels, and seals the zip-lock bag with the skull flap.		
3. Places the specimen bag into the freezer.	Circulating Nurse	
<ol> <li>Logs the storage and/or removal from the freezer.</li> </ol>	Circulating Nurse	
5. Thaws frozen flap at room temperature.		
5. Handles skull flap aseptically		
7. Receives schedule for re-implantation		
8. Retrieves and secures skull flap a day prior to the procedure.	Charge Nurse	
9. Monitors freezer temperature daily		
10. Ou3 tdates expired skull flaps weekly	Charge Nurse	
11. Informs neurosurgeon of the storage status of the skull flap		
12. Discards expired skull flaps as infectious waste.		
13. Handles skull flap aseptically.		
14. Dries skull flap prior to storage.	Scrub Personnel	
15. Secures skull flap in a sterile zip-lock bag.		
16. Confirms storage of skull flap.		
17. Calls charge nurse to schedule reimplantation procedure.	Neurosurgoon	
18. Confirms disposal of expired skull flap.	Neurosurgeon	
19. Submits signed justification note in case of expiration extension.		





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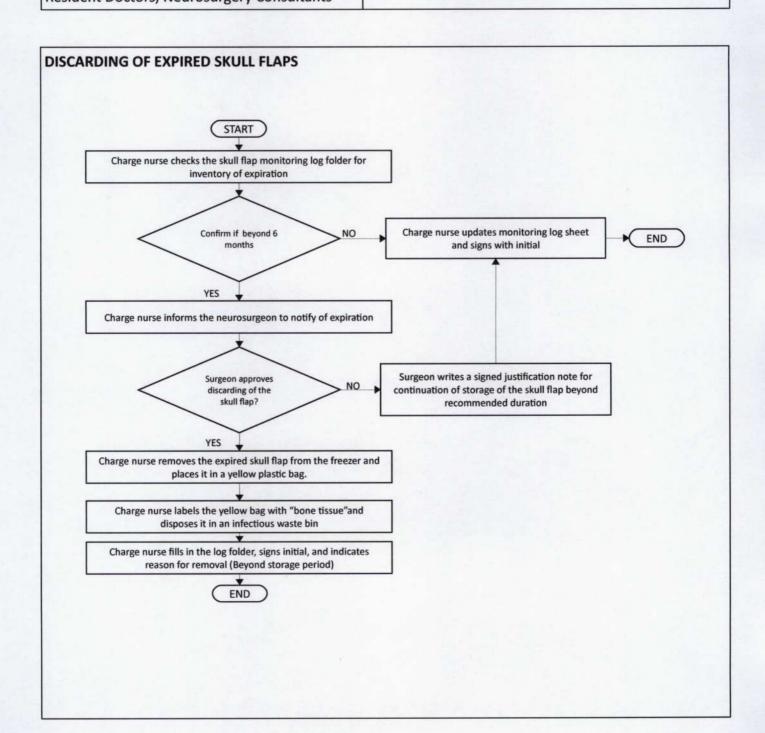
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# Neurosurgeon calls surgical suites charge nurse to schedule the procedure Charge nurse retrieves the record of skull flap and assesses the specimen to confirm information On the day of surgery, circulating nurse removes the skull flap from the freezer and thaws at room temperature for at least an hour Circulating nurse records the date of removal from the freezer and puts the initial in the log folder Circulating nurse opens and peels the two outer zip-lock bags and serves the skull flap to the scrub personnel aseptically END





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### FORMS:

1. DPOTMH-SURGCOM-SS-F001(01)-Skull Flap Card

**EQUIPMENT:** Bone Freezer

### REFERENCES:

- Donnelly, B. M., Smolar, D. E., Baig, A. A., Soliman, M. A., Monteiro, A., Gibbons, K. J., Levy, E. I., & Snyder, K. V. (2023). Analysis of craniectomy bone flaps stored in a neurosurgical cryopreservation freezer: microorganism culture results and reimplantation rates. Acta Neurochirurgica, 165(11), 3187–3195. From <a href="https://doi.org/10.1007/s00701-023-05764-7">https://doi.org/10.1007/s00701-023-05764-7</a>
- 2. Canberra Hospital and Health Services Clinical Procedure (2018) . Storage of Skull Flaps. From <a href="https://www.health.act.gov.au/sites/default/files/2019-02/Storage%20of%20Skull%20Flaps.docx">https://www.health.act.gov.au/sites/default/files/2019-02/Storage%20of%20Skull%20Flaps.docx</a>
- 3. Agrawal, R., Rompf, C., Pranada, A. B., Vollmar, P., De Lorenzo, A., Hoyer, A., & Gousias, K. (2022). Microbiological profile and infection potential of different cryopreserved skull flaps after decompressive hemicraniectomy. Is cryopreservation at − 80 ℃ better? BMC Research Notes, 15(1). From <a href="https://doi.org/10.1186/s13104-022-06042-y">https://doi.org/10.1186/s13104-022-06042-y</a>





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