

## Probo.CI



CEC\_CHCS — no.3531287

## Partner for Change (No Beds) - 2018: Greening the OR

### Introduction

Between 20 and 30% of a hospital's waste stream may be generated in just one department-- Surgical Services. Greening the OR™ is a Practice Greenhealth initiative focused on providing concentrated sustainability support and assistance to a department that generates a significant portion of the hospital's environmental footprint. The Greening the OR™ Initiative aims to improve worker and patient safety, increase efficiency, and reduce cost while concurrently reducing waste, energy and environmental impact. Practice Greenhealth is looking forward to learning about your programs in this important department.

Practice Greenhealth recognizes leading hospital OR departments with its stand-alone **Greening the OR Recognition Award** that recognizes a baseline set of achievements in reducing the environmental impact of the surgical department. Any Practice Greenhealth member health care facility with **operating rooms** – whether acute inpatient hospital or ambulatory surgery center – is eligible for and encouraged to apply for this award by **opting in** and completing this page.

Practice Greenhealth will continue to recognize the (one) outstanding performer in Greening the **Operating Room** with its **Greening the OR Leadership Award** and the top 10 performers through its **Greening the OR Circle of Excellence**.

**1.** Does your facility have **operating rooms**/procedure rooms or perform a significant amount of surgery?

- ☒ Yes  
☐ Not Applicable

This page intends to gather information on facilities performing surgical procedures. If your facility only performs minor procedures on rare occurrences, then please select "Not Applicable" and provide a brief explanation.

If your facility does not have **operating rooms**/does not perform surgical procedures, please move on to the next page (leaving the rest of this page blank).

**2.** Would your facility like to be considered for the **Greening the OR Award**?

- ☒ Yes  
☐ No

By selecting yes, this page of the application will be considered for the stand-alone Greening the OR Recognition Award, the Greening the OR Circle of Excellence and the Greening the OR Leadership Award.

**3.** Does your facility have a sustainability champion or leader in the OR?

- ☒ Yes  
☐ No

This question is asked "new" each year, as champions can come and go--and Practice Greenhealth wants to understand who was influencing the OR work over the course of 2017.

**3.a** Name of sustainability champion or leader in the OR:

**3.b** Title of sustainability champion or leader in the OR:

**3.c** Email of sustainability champion or leader in the OR:

## Waste Segregation & Management

Proper waste management is critical to any successful environmental stewardship program, but it is especially important within the **operating room**. **The OR can account for 30% of a facility's overall waste and more than half of its regulated medical waste.** There are strategies to reduce the amount of waste generated by the OR, but it's also important for facilities to ensure that the waste is being properly segregated to maximize **recycling** and reduce cost. Please use this section to highlight the waste segregation strategies implemented by the surgical department.

You may leave a requested data point blank, but please **do not enter zeros. Enter savings as a positive number.**

**4.** Does the facility have a process to **divert pre-incision (prior to the case)** (non-pharmaceutical) waste from the **regulated medical waste stream** into the **solid waste** stream or **recycling** stream for non-infectious waste disposal?

- ☐ Yes  
☐ No

**5.** Does the facility have a process to **segregate** non-infectious **solid waste** from the **regulated medical waste** stream **during and after the procedure?**

- ☐ Yes  
☐ No

**6.** Does the facility **utilize a fluid management system that does not use** disposable suction canisters as a means to reduce exposure to bloodborne pathogens and reduce waste (ie. reusable canister systems or a system hard-wired into the plumbing system)?

- ☒ Yes  
☐ No

Please share any associated **cost savings** in 2017 in **Table A**:

**Table A. Fluid Management Avoided Waste and Cost Savings**

Avoided waste (tonnage)	<b>6.a</b> <input type="text"/>
Avoided waste disposal fees from disposable canisters	<b>6.b</b> <input type="text"/>
Avoided purchase cost of disposable canisters	<b>6.c</b> <input type="text"/>
Avoided purchase cost of chemical solidifiers (if applicable)	<b>6.d</b> <input type="text"/>

<b>Other Benefits:</b> (ie. staff safety, unnecessary purchase of PPE, red bags, labels, etc)	<b>6.e</b> <div style="border: 1px solid black; height: 30px; width: 100%;"></div>
---	---

The following questions on **recycling clinical plastics** are also asked on the **Waste** page in regards to other areas of the facility beyond the **operating room**.

**7.** Does the facility **recycle clinical/medical plastics** in the OR?

- ☒ Yes  
☐ No

**7.a** Please select all clinical/**medical plastics** being **recycled in the operating room**:

- ☐ Irrigation bottles  
☐ Skin prep solution bottles  
☐ Trays  
☐ Overwraps  
☐ Rigid inserts  
☐ Blue wrap  
☐ Tyvek  
☐ Basins  
☐ Urinals/Bedpans  
☒ Other

**7.a.a** Please describe **other** plastics being recycled in the OR in 2017:

**7.b** Is the facility **tracking** the weight of **medical plastics** recycled specifically from the OR?

- ☒ Yes  
☐ No

**7.b.a** What is the weight of **medical plastics** (in tons) recycled in 2017 in the OR?

## Single Use Device Reprocessing

Reprocessing of single-use medical devices (SUDs) goes beyond the **operating room** and includes many other patient care areas. To simplify, Practice Greenhealth is asking all questions pertaining to SUD reprocessing on the Greening the OR page. Please enter all SUD reprocessing data below.

**8.** Has the facility implemented a single-use device (SUD) reprocessing program by an FDA-approved third party reprocessor?

Yes ▼

Please indicate which **department(s)** your facility has implemented a reprocessing program in by selecting Yes or No below.

**Table B1. Reprocessing by Department**

Device Type		
Department	Non-Invasive Devices	Invasive Devices
OR	<b>8.a</b> <input type="checkbox"/> None <input type="checkbox"/> Collect <input type="checkbox"/> Purchase	<b>8.b</b> <input type="checkbox"/> None <input type="checkbox"/> Collect <input type="checkbox"/> Purchase
EP/Cath	<b>8.c</b> <input type="checkbox"/> None <input type="checkbox"/> Collect <input type="checkbox"/> Purchase	<b>8.d</b> <input type="checkbox"/> None <input type="checkbox"/> Collect <input type="checkbox"/> Purchase
Patient Care	<b>8.e</b> <input type="checkbox"/> None <input type="checkbox"/> Collect <input type="checkbox"/> Purchase	<b>8.f</b> <input type="checkbox"/> None <input type="checkbox"/> Collect <input type="checkbox"/> Purchase
Other	<b>8.g</b> <input type="checkbox"/> None <input type="checkbox"/> Collect <input type="checkbox"/> Purchase	<b>8.h</b> <input type="checkbox"/> None <input type="checkbox"/> Collect <input type="checkbox"/> Purchase

Please enter the **total** avoided waste in **pounds (Lbs)** in 2017 as a result of your facility's reprocessing collection program below.

**Table B2. SUD Reprocessing Collection Data**

SUD Reprocessing Collection Savings	Total
Weight of devices collected (in pounds, Lbs)	<b>8.i</b> <input type="text"/>
Weight of devices collected, converted to tonnage	<b>8.j</b> <input type="text" value="0"/>
Avoided waste disposal costs	<b>8.k</b> <input type="text"/>

**8.l** This is your facility's pounds of reprocessed devices collected per OR procedure:

Practice Greenhealth would like to capture the reprocessing purchasing power of the health care sector through the dollars spent on reprocessed devices. In the table below, please enter the total dollars **spent** on purchasing FDA-approved reprocessed medical devices.

**Table B3. Dollars (\$) Spent on Reprocessed Devices**

Category	2016	2017	Change (\$)
Non-Invasive	<b>8.m</b> <input type="text"/>	<b>8.n</b> <input type="text"/>	<b>8.o</b> <input type="text" value="0"/>
Invasive	<b>8.p</b> <input type="text"/>	<b>8.q</b> <input type="text"/>	<b>8.r</b> <input type="text" value="0"/>
Total	<b>8.s</b> <input type="text" value="0"/>	<b>8.t</b> <input type="text" value="0"/>	<b>8.u</b> <input type="text" value="0"/>

\*Please know that this "Change" field is simply to capture a year to year difference. There is no normalization factor included in this calculation. Difference in case volume, contracts, etc. may play a big part in this difference. A positive number indicates more spent in 2017 than 2016. A negative number indicates less spent in 2017 than 2016.

Please Enter Total \$ Saved on Purchased Reprocessed Devices in the Table Below.

**Table B4. Reprocessing Purchase Savings**

Reprocessing Program Savings	2016	2017	Change (\$)
Non-Invasive Devices	<u>8.v</u> <input type="text"/>	<u>8.w</u> <input type="text"/>	<u>8.x</u> <input type="text" value="0"/>
Invasive Devices	<u>8.y</u> <input type="text"/>	<u>8.z</u> <input type="text"/>	<u>8.aa</u> <input type="text" value="0"/>
Total	<u>8.ab</u> <input type="text" value="0"/>	<u>8.ac</u> <input type="text" value="0"/>	<u>8.ad</u> <input type="text" value="0"/>

\*Please know that this "Change" field is simply to capture a year to year difference. There is no normalization factor included in this calculation. Difference in case volume, contracts, etc. may play a big part in this difference. A positive number indicates greater savings achieved in 2017 than 2016. A negative number indicates less savings in 2017 than 2016.

8.ae Please attach any related **reprocessing policies** in place at the facility or system level.

8.af Is your facility participating in the **Reprocessing Goal** of the **Smarter Purchasing Challenge** of the Healthier Hospitals program?

- ☒ Yes  
☐ No

8.af.a Please describe any progress toward the Healthier Hospitals Reprocessing Goal:

## Waste Reduction in the OR

Identifying opportunities to eliminate unnecessary waste from the **operating room** waste stream can help facilities reduce upfront purchase costs as well as avoid waste disposal costs, and reduces the amount of waste requiring disinfection/treatment. Please highlight any strategies or projects the facility has utilized to reduce the amount of waste leaving the OR, including reducing unnecessary supplies, better inventory tracking, using reusable or reprocessable equipment, and more.

**9.** Does the facility **reformulate custom procedure packs**--removing supplies not typically used--to reduce purchase and disposal fees for excess supplies, and decrease the environmental impact of manufacture and disposal of those supplies?

- ☒ Yes  
☐ No

Please fill in **Table C**. Please enter the number of **types** of kits the facility uses (e.g., 32 different types of custom kits, of which, 28 types were reviewed).

**Table C. OR Kit/Custom OR Procedure Pack Reformulation Waste and Supply Savings**

Total number of Custom OR Procedure Pack Types	<b>9.a</b> <input type="text"/>
Number of Pack Types Reviewed	<b>9.b</b> <input type="text"/>
Percent of OR Custom Pack Types Reviewed	<b>9.c</b> <input type="text" value="0"/>
Optional:	
Avoided Purchase Cost of Unnecessary Supplies	<b>9.d</b> <input type="text"/>
Avoided Waste Disposal Savings (\$)	<b>9.e</b> <input type="text"/>
Other Savings	<b>9.f</b> <input type="text"/>

**10.** Does the organization have a process in place to regularly compare, review and **update surgeon preference cards** for the same type of procedure?

- ☒ Yes  
☐ No

**10.a** Please describe the process in place to regularly compare, review and update surgeon preference cards for the same type of procedure:

**11.** Is your facility participating in the **OR Kit Review Goal** of the **Smarter Purchasing Challenge** of the Healthier Hospitals program?

- ☒ Yes  
☐ No

**11.a** Please describe any progress toward the Healthier Hospitals OR Kit Review Goal:

**12.** Does the facility purchase **reusable surgical items** where environmentally and clinically preferable?

Yes ▼

Please indicate in **Table D.** any reusable surgical items in the OR utilized a **majority of the time (>75%).**

**Table D. Use of Reusable Items in the OR**

Linens	<b>&gt;75%</b>
Back Table Covers	<b>12.a</b> <input type="radio"/> Yes <input type="radio"/> No

<b>Mayo Stand Covers</b>	<b>12.b</b> <input type="radio"/> Yes <input type="radio"/> No
<b>Sterilization wrap</b>	<b>12.c</b> <input type="radio"/> Yes <input type="radio"/> No
<b>Surgical Drapes</b>	<b>12.d</b> <input type="radio"/> Yes <input type="radio"/> No
<b>Surgical Gowns</b>	<b>12.e</b> <input type="radio"/> Yes <input type="radio"/> No
<b>Surgical Towels</b>	<b>12.f</b> <input type="radio"/> Yes <input type="radio"/> No
<b>12.g</b> Other Linens, please describe <div></div>	<b>12.h</b> <input type="radio"/> Yes <input type="radio"/> No
<b>Other Reusable Devices and Equipment</b>	
<b>Anesthesia Circuit</b>	<b>12.i</b> <input type="radio"/> Yes <input type="radio"/> No
<b>Endotracheal Tubes (ETT)</b>	<b>12.j</b> <input type="radio"/> Yes <input type="radio"/> No
<b>Grounding Pads</b>	<b>12.k</b> <input type="radio"/> Yes <input type="radio"/> No
<b>Laryngeal Mask Airways (LMA)</b>	<b>12.l</b> <input type="radio"/> Yes <input type="radio"/> No
<b>Patient Positioning Devices</b>	<b>12.m</b> <input type="radio"/> Yes <input type="radio"/> No
<b>Surgical Basins and Pitchers</b>	<b>12.n</b> <input type="radio"/> Yes <input type="radio"/> No
<b>Trocars</b>	<b>12.o</b> <input type="radio"/> Yes <input type="radio"/> No
<b>12.p</b> Other Reusable Devices, please describe <div></div>	<b>12.q</b> <input type="radio"/> Yes <input type="radio"/> No

**12.r** If tracked, please indicate **tonnage** of reusable items used:

**12.s** If tracked, please indicate any **cost savings** from reusable devices:

**12.t** Provide any additional commentary on reusables in the OR:

**13.** Does the facility utilize **reusable sterilization containers** for surgical instrumentation and reduction of disposable sterile wrap?

- ☒ Yes  
☐ No

Please fill in Table E. (E.g., the facility used 6250 total instrument trays in 2017; of those, 4688 instrument trays were sterilized in reusable containers for a total of 75% trays in reusable sterilization containers)

**Table E. Savings from Reusable Sterilization Containers in the OR**

Total number of instrument trays used	<b>13.a</b> <input type="text"/>
Number of instrument trays used in reusable sterilization containers	<b>13.b</b> <input type="text"/>
Percent of instrument trays utilizing reusable sterilization containers	<b>13.c</b> <input type="text" value="0"/>
Optional:	
Avoided purchase cost (\$ saved) of bluewrap	<b>13.d</b> <input type="text"/>
Avoided waste disposal (tonnage)	<b>13.e</b> <input type="text"/>
Avoided waste disposal fees	<b>13.f</b> <input type="text"/>
Other comments or savings	<b>13.g</b> <input type="text"/>

## Energy Management

The **operating room** is a significant user of energy, with high demand from life-saving medical equipment, high air change per hour requirements, lighting, and more. As a result, strategies to reduce energy consumption in the **operating room** can derive considerable cost and energy savings. Please highlight any energy efficiency projects or strategies in the **operating room**.

**14.** ASHRAE 170 requires a certain number of air changes per hour to ensure patient safety and reduce the risk of surgical site infections in the OR. Some facilities assume that more air exchanges (exceeding code) equals better patient safety despite little clinical evidence to support it. Does the facility meet **but not exceed** air changes per hour per **ASHRAE 170** (20 ACH) as a mechanism to minimize energy consumption in the OR while still ensuring patient safety?

- ☐ Yes  
☐ No



**15.** Has the facility **programmed the HVAC system to reduce air changes per hour** (HVAC setback) when the **ORs** are **unoccupied** to reduce energy consumption?

- ☒ Yes  
☐ No

**15.a** What mechanism(s) does the facility use to control HVAC setback?

- ☐ Occupancy sensors  
☐ Mushroom button  
☐ Scheduling system  
☐ Building Automation System  
☒ Other

**15.a.a** Please describe other mechanisms used for control of HVAC setback:

**15.b** How many **ORs** have implemented an HVAC setback program?

**15.c** **Operating Rooms (ORs):**

From your Facility Profile.

**15.d** Your facility utilizes HVAC setback in this percent of your **ORs**, based on above information:

**15.e** What is the rate of air exchanges per hour (ACH) during unoccupied/setback mode?

**15.f** Has the facility **tracked** associated energy reduction and cost savings from the HVAC setback program?

- ☒ Yes  
☐ No

Please indicate energy and cost savings in Table F.

**Table F. HVAC Setback in the OR Savings**

Energy Savings (kWh)	<b>15.f.a</b> <input type="text"/>
Energy Cost Savings (\$)	<b>15.f.b</b> <input type="text"/>
Other Benefits (i.e., durable medical equipment life, maintenance, etc.)	<b>15.f.c</b> <input type="text"/>

For more information on HVAC Setback Programs for the **Operating Room**, please see the American Society for Healthcare Engineering **OR HVAC Setback Monograph** available [here](#).

**16.** Does the facility utilize **LED surgical lighting**?

- ☒ Yes  
☐ No

**16.a** How many **ORs** are equipped with LED surgical lighting?

**16.b** **Operating Rooms (ORs):**

**16.c** Your facility utilizes LED surgical lighting in this percent of your **ORs**, based on above information:

**16.d** Has the facility tracked **avoided energy use, avoided supply cost, or avoided labor costs** associated with unnecessary bulb changes?

- ☒ Yes  
☐ No

Please fill in Table G.

**Table G. LED Surgical Lighting Savings in the OR**

Type of Savings	Savings
Energy Savings (kWh)	<b>16.d.a</b> <input type="text"/>
Energy Savings (\$)	<b>16.d.b</b> <input type="text"/>
Other Considerations	<b>16.d.c</b> <input type="text"/>

**17.** Does the facility set back or turn down ambient lighting to reduce energy consumption when the OR is unoccupied and not in use?

- ☒ Yes  
☐ No

**17.a** What mechanism(s) does the facility use to control ambient lighting setback?

- ☐ Staff behavior  
☐ Occupancy sensors

- ☐ Scheduling system  
☐ Building Automation System  
☒ Other

---

**17.a.a** Please describe Other:

---

**17.b** How many **ORs** have ambient lighting set back when unoccupied?

---

**18.** Please describe any other energy-savings strategies in the surgical department.

## Anesthesia Use

---

Although very new to the hospital sustainability spectrum, leading hospitals are re-evaluating the anesthesia care regime for environmental stewardship opportunities that align with patient safety and/or cost reduction. Choice and management of anesthetic gases is important to the facility's overall greenhouse gas (GHG) emissions and climate impact. The volatile anesthetic agents used for patient care in an **operating room** or procedural setting are often vented directly into outside air. Even intravenous anesthetic agents, which don't generate greenhouse gases, have an impact on the environment and must be incinerated rather than contaminate land and water supply. And with severe drug shortages, it is even more critical to be sure the facility is carefully managing their use. Tracking and evaluating the use of the different anesthetic agents that are both clinically effective and environmentally preferable is indicative of culture change within the clinical practice.

---

**19.** Has the facility provided or held **anesthesia staff education** on environmental impacts of inhaled anesthetics and reduction strategies for clinicians?

- ☐ Yes  
☐ No

---

**20.** Please describe anesthesia education or strategies:

---

**21.** Please list the **total number of general anesthesia cases** performed in 2017 at the facility (include all adults, pediatrics, OB/GYN, interventional radiology, ambulatory, off-floor, other).

---

**22.** Does the facility purchase or does in-house pharmacy prepare **pre-filled syringes** (not including boxed bristojets) to minimize waste of unneeded pharmaceuticals?

- ☒ Yes  
☐ No

**22.a** Please select all pre-filled syringe types purchased:

- ☐ Pre-filled Ephedrine
- ☐ Pre-filled Phenylephrine
- ☐ Pre-filled Succinylcholine
- ☐ Pre-filled Propofol
- ☒ Other

**22.a.a** Please describe any other **pre-filled anesthetic syringes** being used:

**23.** Does the facility purchase the **smallest pharmaceutical vials possible** to minimize pharmaceutical wastage?

- ☒ Yes
- ☐ No

**23.a** Please describe how the facility minimizes pharmaceutical wastage through smaller vial purchases:

**24.** Does the facility utilize a **supplemental waste anesthetic gas capture system** to prevent waste anesthetic gases from venting to the outside air?

- ☒ Yes
- ☐ No
- ☐ Don't know

Exposure to waste anesthetic gases (WAGs) can have health and safety impacts on staff. All anesthesia machines are connected to a waste anesthetic gas (WAG) scavenging system to protect employee health, which pulls the exhaled air and WAGs from the patient's breathing circuit, up through the central vacuum system and vents these gases off the hospital roof. This question is referring to new, supplemental "capture" technologies that collect these WAGs at the point of generation to reclaim and recycle these gases, preventing the off-gassing of these emissions from the hospital. If uncertain what system your hospital is using, please select **Don't know**.

**24.a** Please describe the supplemental waste anesthetic gas capture system and its results:

**25.** Has the facility removed desflurane from its formulary?

- ☒ Yes
- ☐ No

**25.a** Please describe the strategy used to remove desflurane from the formulary:

Please indicate the **volume of volatile anesthetic agents purchased** in the facility during this award year cycle in Table H below. Please be sure to select the size in mL of the bottle and the number of bottles **purchased** for each agent --the "unit" may vary per facility. The information entered

into this table will be used to calculate and populate the Scope I greenhouse gas emissions for waste anesthetic gases on the Climate page of this application.

**Table H. Volatile Anesthetic Agent Use**

Volatile Anesthetic Agent	Number of Bottles purchased last year	MTCO <sub>2</sub> E
<b>Sevoflurane</b>		
<b>26.</b> Select size in ml Select an option... ▼	<b>27.</b> <input type="text"/>	<b>28.</b> <input type="text" value="0"/>
<b>29.</b> Select size in mL Select an option... ▼	<b>30.</b> <input type="text"/>	<b>31.</b> <input type="text" value="0"/>
<b>32.</b> Other size (in mL) <input type="text"/>	<b>33.</b> <input type="text"/>	<b>34.</b> <input type="text" value="0"/>
	Total:	<b>35.</b> <input type="text" value="0"/>
<b>Isoflurane</b>		
<b>36.</b> Select size in mL Select an option... ▼	<b>37.</b> <input type="text"/>	<b>38.</b> <input type="text" value="0"/>
<b>39.</b> Select size in mL Select an option... ▼	<b>40.</b> <input type="text"/>	<b>41.</b> <input type="text" value="0"/>
<b>42.</b> Other size (in mL) <input type="text"/>	<b>43.</b> <input type="text"/>	<b>44.</b> <input type="text" value="0"/>
	Total:	<b>45.</b> <input type="text" value="0"/>
<b>Desflurane</b>		
<b>46.</b> Select size in mL Select an option... ▼	<b>47.</b> <input type="text"/>	<b>48.</b> <input type="text" value="0"/>
<b>49.</b> Other size (in mL) <input type="text"/>	<b>50.</b> <input type="text"/>	<b>51.</b> <input type="text" value="0"/>
	Total:	<b>52.</b> <input type="text" value="0"/>

Please indicate the facility's **nitrous oxide usage** during this award cycle year in the Table I below. Nitrous oxide comes in gaseous form, compressed in a cylinder or tank. Institutions typically have two types of nitrous oxide cylinders: 1. Portable tank - in the US, this is a standard size E-cylinder that is attached to the back of every anesthesia machine. 2. Stationary tank - this is a very large cylinder from which the gas gets piped through the walls of the hospital and into the anesthesia machine. Enlist the help of the clinical engineering department, pharmacy, or the medical gas supplier. Typically, the medical gas supplier/ vendor can report the total pounds of nitrous oxide supplied to the facility annually. Although nitrous oxide can be used in many departments outside the **operating room**, for the purposes of this application, please enter the facility's total usage here. This will be used in addition to the data supplied in Table I. to calculate the facility's Scope I greenhouse gas emissions from waste anesthetic gases on the Climate page.

**Table I. Annual Nitrous Oxide Purchase**

<b>Nitrous Oxide Use</b>	
Total pounds of N <sub>2</sub> O purchased in 2017	<b>53.</b> <input type="text"/>
MTCO <sub>2</sub> e Nitrous Oxide:	<b>54.</b> <input type="text" value="0"/>

**Scope I Greenhouse Gas Emissions from Waste Anesthetic Gases**

<b>Scope I Greenhouse Gas Emissions from Waste Anesthetic Gases</b>	
Total MTCO <sub>2</sub> e from Purchased Volatile Anesthetic Agents	<b>55.</b> <input type="text" value="0"/>
Total MTCO <sub>2</sub> e from Purchased Nitrous Oxide	<b>56.</b> <input type="text" value="0"/>
Total MTCO <sub>2</sub> e from Purchased Inhaled Anesthetics	<b>57.</b> <input type="text" value="0"/>

The NHS England and England Public Health Sustainable Development Unit also offers assistance calculating the carbon footprint of anesthetic gas usage, available here: [\*\*SDU Anesthetic Gas Calculator\*\*](#)

The American Society of Anesthesiologists provides guidance on Greening the OR for anesthesiologists in [\*\*Greening the Operating Room and Perioperative Arena: Environmental Sustainability for Anesthesia Practice\*\*](#).

**58.** Please describe any additional work the facility has done around anesthesia strategies:

**Greening the OR Total Savings****Greening the OR Total Savings**

<b>Avoided Waste (tonnage)</b>	<b>Cost Savings (\$)</b>	<b>Energy Saved (kWh)</b>
<b>59.</b> <input type="text" value="0"/>	<b>60.</b> <input type="text" value="0"/>	<b>61.</b> <input type="text" value="0"/>

**Greening the OR Successes**

Please describe any other innovative Greening the OR programs or successes at the facility this past year (not mentioned above) that you would like to share in the spaces below. Please feel free to provide commentary and/or attach a file.

**62.** GOR Success 1: Please describe

---

**63.** Please attach any additional documentation (optional) for GOR Success 1:

---

**64.** GOR Success 2: Please describe

---

**65.** Please attach any additional documentation (optional) for GOR Success 2:

---

**66.** GOR Success 3: Please describe

---

**67.** Please attach any additional documentation (optional) for GOR Success 3:

---