

# **Safety in Obstetrics: Sureglide™ Safety Scalpel Eliminates Risk of Newborn Laceration and Sharps Injury Associated with Cesarean Delivery**

Testimonial from Dr. Dean Hildahl, North Naples Gynecology and Obstetrics, Naples, Florida

## **Introduction**

Dr. Dean Hildahl is a leading provider of Obstetric and Gynecological care in south Florida. Board certified, Dr. Hildahl MD, has been in practice since 1981 and completed his residency in Obstetrics and Gynecology at the Mayo Clinic. Dr. Hildahl has delivered roughly 350 babies per year over the last 20 years and regards safety, protection and quality of care as the forefront of their mission.

## **Background**

In July of 2017, Dr. Hildahl decided to trial the Sureglide in an effort to minimize the risk of fetal lacerations and provide additional safety and protection to his operating room staff. “Patients deserve a baby in the best possible condition. Even if a laceration is unavoidable and heals easily it makes the surgeon look and feel terrible”. According to the National Institutes of Health, fetal lacerations occur in at least 3% of all deliveries. Furthermore, The Centers for Disease Control and Prevention estimates that about 385,000 sharps related injuries occur annually among health care workers in hospitals.

The Sureglide cesarean delivery scalpel design eliminates exposure of the surgical blade to the fetus during entry into the uterus. A stainless steel blade is molded into a plastic handle that extends past the blade and forms a protective tip. With the blade facing up, the tip is pushed through the serosa and myometrium and extended to create a hysterotomy, or can be extended with blunt dissection.

## **Implementation: Trial and Conversion**

Since the onset of his trial, Dr. Hildahl has performed 50 cesarean deliveries with Sureglide. Sureglide requires modified technique by the surgeon, moving the scalpel “away versus toward” during the procedure. “When I first used Sureglide I found the need for repetitive movements, which took some getting used to - even though it is intuitive to use I wasn’t used to the movement of the scalpel away from me instead of drawing it toward me.” Consequently, Dr. Hildahl reports performing four to five C-sections before becoming accustomed to this adjustment. Once becoming comfortable with the “up and away” incision, he now prefers to use Sureglide in all of his cesarean deliveries. For thick uterine walls, Dr. Hildahl uses the Sureglide to progressively separate the myometrium without worry about nicks, cuts or lacerations to the baby. He validates the protective design of Sureglide, and its ability to penetrate a thin or thick uterine wall, while avoiding risk to the baby and his staff, especially in an emergency or urgent situation.

## **Results and Conclusion:**

Since the implementation of Sureglide, North Naples Gynecology and Obstetrics has not had a fetal laceration or sharps injury to a patient or surgical staff member during a cesarean delivery. Dr. Hildahl concurs that Sureglide is an “intuitive device, optimized to provide superior line of sight, comfort and control for physicians”. The Sureglide design reduces the risk of injury with its blunt entry, efficiently designed handle and protected blade. He recommends Sureglide to his colleagues for cesarean deliveries for its unequivocal level of protection to newborns and staff. “I recommend to all my colleagues and feel it should be a standard of care”.