UTMB Vendor Representative Procedures

UTMB faculty and staff interacting with Vendor Representatives are to ensure the following procedure occurs:

1) Vendor Registration
   a. Vendor Representatives must sign-in and obtain a “One Day” ID badge. This badge may be obtained at the following location:
      i. Materials Management Building at 13th and Strand Streets, Monday – Friday 8 a.m. – 5 p.m.
      ii. The greeter’s station, main entrance to the Jennie Sealy Hospital
      iii. The greeter’s station, main entrance to the John Sealy Hospital
      iv. The greeter’s station, main entrance to the UTMB Health Clinics (UHC)
      v. The greeter’s station, entrance A to the Primary Care Pavilion (PCP)
      vi. The greeter’s station, Specialty Care Center at the League City Campus
      vii. The greeter’s station, main entrance to the League City Hospital
      viii. The greeter’s station, Angleton Danbury Campus
      ix. The surgery check-in, Angleton Danbury Campus
   b. Contract Vendors housed at UTMB will be given a UTMB ID badge for a specified period of time upon authorization from Purchasing or Central Acquisitions, BOF, UTMB Campus Police, and the involved department.

2) Vendor Appointments
   a. Vendor Representatives must have appointments prior to arrival on campus.
   b. Each appointment authorization is for that appointment only, and does not provide authorization to visit any other areas of the hospital or meet with any other staff.
   c. Vendors presenting without identification will not be permitted access to any areas of the OR or any other department.
   d. No “general sales calls” will be permitted at any time.

3) Vendor Access to Patient Care/Research Areas
   a. Vendors may not enter any areas, i.e. offices, lounges, locker rooms, waiting rooms or corridor areas, in proximity to the OR, without proper identification.
   b. If access to the restricted area is necessary, the vendor must obtain a red hat at the front entrance of the Operating Room.
   c. “Tailgating” or “Piggybacking” where one vendor representative officially registers but is accompanied by other representatives of that company who have not registered is strictly prohibited.
   d. “Shadowing” or following physicians or other clinical personnel is prohibited.
   e. Vendor shall not touch patient at any time with limited exceptions:
      i. A waiver must be signed by the vendor and the department and kept on file in the department with a copy in Purchasing.
      ii. UTMB staff must be present while vendor is touching patient.
      iii. Vendors shall not attend programs in which specific patients are discussed or when quality assurance or risk management issues are presented.

4) Vendor Responsibilities
   a. Vendors must follow guidelines outlined in the IHOP Policy 9.7.2 Vendor Visitation: UTMB Clinical Enterprise
   b. Vendors may not enter any areas of the OR, i.e. offices, lounges, locker rooms, waiting rooms, or corridor areas, in proximity to the OR, without PRE-APPROVAL
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from the Administrative Coordinator and/or the appropriate Clinical Service Coordinator and completing sign in at OR front desk.


d. Vendors should refrain from entering an operating room until after the patient has been anesthetized, prepped, and draped. If necessary, the vendor may come into the OR prior to the patient to guide staff through equipment set up. The vendor should then leave the OR until after the patient has been anesthetized, prepped and draped. Vendors should not be in the OR while the patient is awake and/or exposed.

e. Vendors are forbidden to personally operate, use or manipulate any equipment (vendor or hospital owned) at any time in any way in the Operative Suite with the exception of programmable equipment.

f. Vendors are forbidden to open and use sterile supplies.

g. Vendors are allowed to offer technical advice to the surgical team regarding their equipment or device.

h. Vendors must have completed and received VendorMate sign off on all UTMB requirements in the VendorMate system.

i. Vendors will not submit New Product Review requests. These are to be completed and signed by the requesting surgeon and section chief.

Delivery and Use of Non-Formulary Supplies, Equipment or Instrumentation

5) Supplies, Instruments and/or Equipment

a. Vendors must have written authorization from the OR Materials Management Administrative Coordinator and/or the appropriate CSC prior to bringing any non-formulary (not owned or used by UTMB Hospital equipment, implant, instrumentation or products into the OR for use or trial). Vendors will not be reimbursed for trial products. If trial products are introduced without written authorization, the vendor representative may be suspended.

6) Instrument Specific Expectations

a. Instrumentation/implants requiring sterilization by the hospital must be delivered to CSS main entrance in the basement of the West Pavilion 12 hours prior to surgery. Instrument sets must be checked and removed from the hospital within 12 hours after surgery.

b. The vendor must complete the consignment instrument log-in documentation in CSS at time of delivery.

c. Count sheets must be provided.

d. Vendors routinely providing consignment instrumentation to UTMB must meet with Central Sterile Supply Manager to develop and maintain a vendor specific UTMB authorized consignment inventory list. The ongoing maintenance of this list is the responsibility of the vendor.

7) Equipment Specific Expectations

a. Vendors must complete the Capital Equipment Trial/Loan form, including all required signatures, prior to bringing or delivering any equipment to the OR. A copy of this completed form must be presented to the CSC, a copy should be provided to OR Materials Management Administrative Coordinator and one should be kept for your records.

b. The Clinical Engineering Department must inspect all electrical equipment brought into UTMB Perioperative Services. Inspection stickers will be affixed by Clinical
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Engineering. Any equipment needed for 7:30AM cases must be brought in the weekday prior to use for safety inspection.

c. After obtaining advance written authorization, the vendor will provide education and training for products, equipment, devices or technology prior to use in the Operating Room and whenever requested by the attending surgeon or operating room management. Such training shall include, but not necessarily be limited to, sufficient information regarding sterilization, decontamination, and proper disposal of products, equipment, and devices as well as latex allergy implications.

8) Loaner/Demonstration Equipment
   a. All incoming products and equipment whether purchased, on loan, trial, etc., must be covered by a UTMB Purchase Order issued by the Purchasing and Contract Management Department.
   b. All medical equipment used in patient care areas must go through the value analysis process and appropriate Cost Management Team prior to evaluation.
   c. All medical electronic equipment must be tested and approved for electrical safety by Clinical Equipment Services prior to evaluation.
   d. A vendor release form must be completed and signed prior to delivery of equipment to UTMB.
   e. Appropriate training must be provided for end users and documented, prior to evaluation
   f. The company loaning/demonstrating equipment is responsible for picking up equipment after loan/assessment is complete.
   g. UTMB will not be responsible for any equipment left on campus 20 working days after completion of loan/assessment.
   h. Vendor Representative must notify Clinical Equipment Services when loaned/assessed equipment leaves campus.

9) Violation of Vendor Policy
   a. The Vendor Representative Policy must be rigidly followed by vendors and UTMB personnel.
   b. Failure to comply with these Procedures shall result in the loss of Vendor’s privileges, and exclude the Vendor Representative from further transactions with UTMB
      i. Length and duration of privilege loss will be determined on a case-by-case basis by the Director of Supply Chain Management, in consultation with the appropriate departments.
      ii. Any exception to the foregoing will occur on a case-by-case basis by the designated administrator for that area, with immediate follow up with Senior Manager of Value Analysis following the end of those activities.
   c. All UTMB personnel will assist in monitoring compliance. In the event that a member of the UTMB staff observes a vendor in a UTMB work or patient care area without an approved UTMB Vendor Badge, the staff should do the following:
      i. Ask the vendor if they are aware of the Vendor Visitation Policy. (If not, they should be asked to contact the office of Materials Management)
      ii. Ask the vendor for his/her name and company and request that they leave the area immediately.
      iii. Notify Clinical Value Analysis with the vendor information
   d. Any violations of the above guidelines will subject the representative and/or company to suspension of on-campus visitation privileges and may be cause for removal of company from UTMB’s approved vendor list. A mandatory meeting between Purchasing and Value Analysis with the vendor representative and their
e. Violations of the policy will be subject to intervention by University Police.