

Surgical Safety Checklist – In Office

Before induction of anaesthesia



Before skin incision



Before patient leaves OR

PRE - OP

Preoperative Chart review including: Consents, Imaging, History and Physical

- Yes

Preoperative medications given:

Has the patient confirmed his/her identity (twice), incision site, side and procedure?

- Yes

Is the surgical site marked?

- Yes

What is the ASA class of the patient (circle)?

I II III

(ASA IV through VI should NOT be performed in office setting)

Does the patient have any allergies?

TIME OUT

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- Confirm all team members have introduced themselves by name and role
 - Confirm the patient's name, procedure, side, and where the incision will be made
 - If prescribed, antibiotic prophylaxis taken
 - Patient appropriately positioned / supported
 - Confirmation of any specimens to be taken
 - Operating table locked, chair secured
 - Instruments and equipment available
 - Patient Specific Concerns communicated

Anticipated Critical Events

To Surgeon:

- What are the critical or non-routine steps?
- How long will the case take?
- What is the anticipated blood loss?
- Any need for special instruments /implants?

To Operating Team:

- Sterility of instruments (including indicator results) confirmed
 - Addressed concerns on equipment issues.
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Is essential imaging displayed or reviewed?

- Yes
- Not applicable

DEBRIEFING

Nurse / Assistant Verbally Confirms:

- The name of the procedure
 - Completion of instrument, sponge and sharp counts
 - Specimen labelling (read specimen labels aloud, including patient name)
 - Whether there are any equipment problems
 - Tourniquet Time _____
 - Tourniquet Pressure _____
 - Tourniquet Break time _____
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To Surgical Team:

- What are the key concerns for recovery and management of this patient?
- Estimated blood loss documented
- Identify areas to improve safety / efficiency
- Review important intra-op events

Patient Name:

Information: