### PILOT - SURGICAL SAFETY CHECKLIST

#### AMBULATORY SURGERY CENTERS

<table>
<thead>
<tr>
<th>BEFORE INDUCTION OF ANESTHESIA</th>
<th>BEFORE SKIN INCISION (TIME OUT)</th>
<th>BEFORE PATIENT LEAVES ROOM</th>
</tr>
</thead>
<tbody>
<tr>
<td>(Circulator or Anesthesia Provider Led)</td>
<td>(Surgeon Led)</td>
<td>(Circulator Led)</td>
</tr>
</tbody>
</table>

#### Circulator to the team:
- I have confirmed the following with the patient:
  - Patient name
  - Surgical site
  - Surgical procedure to be performed
  - Consent
  - The site has been marked

#### Anesthesia/sedation provider with the team:
- The anesthesia safety check has been completed
- Review of patient allergies
- Anticipated airway or aspiration difficulty
- Required equipment/assistance available
- Active warming in place

#### Circulator to the team:
- Has sterility been confirmed (including indicator results)?
- Are external compression devices in place if needed?
- Implants, medications, and solutions are available
- Are there equipment issues or other concerns?

#### BEFORE INDUCTION check complete

#### Circulator: Attention! We need to do a TIME OUT.

#### Surgeon: We'll start by introducing ourselves and our roles.
- This is [patient's name]
- We are doing [procedure/site/laterality] as stated on the consent.
- I have confirmed that the patient is in the correct position for this procedure.
- I have confirmed that the site marking is visible.
- Review of patient allergies if indicated

#### Circulator to the surgeon:
- How long will the case take?
- Are there any critical steps?
- Is essential imaging available and accessible?

#### Circulator to the anesthesia provider:
- Have antibiotics been started within the required time and documented?

#### Circulator to the team:
- Baseline counts have been completed

#### Surgeon to the team:
- I request that anyone who has a concern at any time speak up.
- Does everyone agree we are ready to go?

#### BEFORE SKIN INCISION check complete

#### Circulator to the team:
- How shall I record the procedure name?
- What is the wound classification for this case?
- I have ________ (#) specimens and have labeled them as _________.
- Are there special instructions for the pathologist?
- I have verified that the counts are correct.
- Are there any equipment issues to be addressed?
- What are the key concerns for recovery and management of this patient?

#### Optional:
- Is there anything we could have done better?

#### BEFORE LEAVING ROOM check complete

Based on the WHO Surgical Safety Checklist developed by:

[World Health Organization](https://www.who.int/)