Regions Hospital®

Modification of WHO Surgical Safety Checklist

Before induction of anaesthesia ▶▶▶▶▶▶▶

SIGN IN

☐ **PATIENT HAS CONFIRMED**
- **IDENTITY**
- **SITE**
- **PROCEDURE**
- **CONSENT**

☐ **SITE MARKED/DIAGRAM**

☐ **ANAESTHESIA SAFETY CHECK COMPLETED**

DOES PATIENT HAVE:

KNOWN ALLERGIES?

☐ NO
☐ YES -- ALLERGIES ARE VERBALIZED

DIFFICULT AIRWAY/ASPIRATION RISK?
☐ NO
☐ YES, AND EQUIPMENT/ASSISTANCE AVAILABLE

RISK OF >500ML BLOOD LOSS
(7ML/KG IN CHILDREN)?
☐ NO
☐ YES, AND ADEQUATE INTRAVENOUS ACCESS AND FLUIDS PLANNED

Before skin incision ▶▶▶▶▶▶▶▶▶▶▶▶▶

TIME-OUT

☐ **CONFIRM ALL TEAM MEMBERS HAVE INTRODUCED THEMSELVES BY NAME AND ROLE**

ANTICIPATED CRITICAL EVENT BRIEFING

☐ **SURGEON REVIEWS:** WHAT ARE THE CRITICAL OR UNEXPECTED STEPS, OPERATIVE DURATION, ANTICIPATED BLOOD LOSS? MEDS ON FIELD, ANTICIPATED REPOSITIONING AND SPECIMENS

☐ **ANAESTHESIA TEAM REVIEWS:** ARE THERE ANY PATIENT-SPECIFIC CONCERNS?

☐ **NURSING TEAM REVIEWS:** HAS STERILITY (INCLUDING INDICATOR RESULTS) BEEN CONFIRMED? ARE THERE EQUIPMENT ISSUES OR ANY CONCERNS?

☐ **REGIONS TIME-OUT PROCESS IS PERFORMED**

Before patient leaves operating room

SIGN OUT

NURSE VERBALLY CONFIRMS WITH THE TEAM:

☐ **THE NAME OF THE PROCEDURE RECORDED**

☐ **THAT INSTRUMENT, SPONGE AND NEEDLE COUNTS ARE CORRECT** (OR NOT APPLICABLE)

☐ **HOW THE SPECIMEN IS LABELLED** (INCLUDING PATIENT NAME)

☐ **WHETHER THERE ARE ANY EQUIPMENT PROBLEMS TO BE ADDRESSED**

☐ **MEDICATIONS GIVEN DURING THE CASE - SPECIFY DOSE**

☐ **SURGEON, ANAESTHESIA PROFESSIONAL AND NURSE REVIEW THE KEY CONCERNS FOR RECOVERY AND MANAGEMENT OF THIS PATIENT**

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