Surgical Safety Checklist *UNC Labor & Delivery*

Before induction of anesthesia ▶▶▶▶▶▶
(Nurse reads out loud)

SIGN IN

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

☐ **ANESTHESIA HAS MET PATIENT AND SAFETY CHECK COMPLETED**

☐ **PULSE OXIMETER ON PATIENT AND FUNCTIONING**

DOES THE PATIENT HAVE A:

KNOWN ALLERGY?
☐ NO
☐ YES

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

RISK OF POSTPARTUM HEMORRHAGE?
☐ NO
☐ YES, AND TYPE AND SCREEN ACTIVE

☐ **OB ATTENDING/FELLOW HAS MET PATIENT**

NICU TEAM ANTICIPATED?
☐ NO
☐ YES, AND CONTACTED

Before skin incision ▶▶▶▶▶▶▶▶▶▶▶▶
(Nurse reads out loud)

TIME OUT

☐ **CONFIRM ALL TEAM MEMBERS HAVE INTRODUCED THEMSELVES BY NAME AND ROLE**
- CIRCULATING NURSE
- ATTENDING/FELLOW SURGEON
- ANESTHESIA ATTENDING
- NICU TEAM LEADER (if applicable)

☐ **SURGEON, ANESTHESIA AND NURSE VERBALLY CONFIRM**
- PATIENT
- PROCEDURE
- CONSENTED FOR TUBAL?
- ALLERGIES

HAS ANTIBIOTIC PROPHYLAXIS BEEN GIVEN WITHIN LAST 60 MINUTES?
☐ YES
☐ NOT APPLICABLE

IS DVT PROPHYLAXIS NEEDED?
☐ YES, AND SCD'S IN PLACE
☐ NOT APPLICABLE

ANTICIPATED CRITICAL EVENTS

☐ **SURGEON REVIEWS**: UNEXPECTED STEPS, ANTICIPATED BLOOD LOSS, NICU REQUIRED?

☐ **ANESTHESIA REVIEWS**: ANY PATIENT SPECIFIC CONCERNS?

☐ **NURSING REVIEWS**: HAS STERILITY BEEN CONFIRMED? ARE THERE ANY EQUIPMENT CONCERNS?

Before patient leaves OR
(Nurse reads out loud)

SIGN OUT

NURSE VERBALLY CONFIRMS WITH THE TEAM:

☐ **THE NAME OF THE PROCEDURE**

☐ **THAT INSTRUMENT, SPONGE AND NEEDLE COUNTS ARE CORRECT**

☐ **SPECIMEN(S) ARE PROPERLY LABELLED and SENT**
- ☐ PLACENTA
- ☐ TUBAL SEGMENTS
- ☐ CORD BLOOD
- ☐ CORD BLOOD GAS
- ☐ OTHER

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

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

Based on the WHO Surgical Safety Checklist developed by:

World Health Organization