

SURGICAL SAFETY CHECKLIST

MAJOR ANESTHESIA

PIN # _____ VISIT # _____
PATIENT LAST NAME _____ PATIENT FIRST NAME _____ PATIENT MIDDLE NAME _____
TELEPHONE # _____
D.O.B. _____ MM/DD/YYYY _____ AGE _____ SEX _____ ONT HEALTH CARD # _____
ATTENDING PHYSICIAN _____
FAMILY PHYSICIAN _____

*****ALL TEAM MEMBERS MUST BE PRESENT FOR ALL 3 PHASES OF CHECKLIST*****

BRIEFING - Before induction of anesthesia

All team members introduce themselves to patient

CIRCULATING NURSE

Patient information confirmed

- Identify (2 identifiers)
- Consent(s)
- Site, side and procedure
- Site marked
- Clinical documentation
- History, physical, labs, biopsy and x-rays

Allergies

Medications

- Antibiotic prophylaxis: double dose?
- Glycemic control
- Beta blockers
- Anticoagulant therapy (e.g. Warfarin)?

Specific patient concerns, sterility indicator results and equipment / implant issues

VTE Prophylaxis

- Anticoagulant
- Mechanical

ANESTHESIOLOGIST

Difficult Airway / Aspiration Risk

- Confirm equipment and assistance available

Monitoring

- Pulse oximetry, ECG, BP, arterial line, CVP, temperature and urine catheter

Specific patient concerns and critical resuscitation plans

ASA Class

Anesthesia equipment safety check completed

SURGEON(S) REVIEW(S)

Blood loss

- Anticipated to be more than 500 mL (adult) or more than 7mL/kg (child)
- Blood products required and available
- Patient grouped, screened and cross matched

Specific patient concerns, critical steps, and specific instruments or implants

Confirm essential imaging displayed

Review final test results

Patient positioning and support / warming devices

Special precautions i.e. MH

TIME OUT - Before skin incision

Surgeon, Anesthesiologist, and Nurse verbally confirm

- Patient
- Site and side
- Procedure
- Antibiotic prophylaxis: repeat dose?

"Does anyone have any other questions or concerns before proceeding?"

DEBRIEFING - Before patient leaves OR

Surgeon reviews with entire team

- Procedure if any changes to booked procedure
- Important intra-operative events
- Fluid balance / management if applicable i.e. uterine ablation

Anesthesiologist reviews with entire team

- Important intra-operative events if applicable
- Recovery plans (including postoperative ventilation, pain management, glucose and temperature)

Nurse(s) review(s) with entire team

- Instrument / sponge / needle count
- Specimen labeling and management
- Important intraoperative events (including equipment malfunction)

Changes to post-operative destination?

Could anything have been done to make this case safer or more efficient i.e. equipment issues?

Hand-off to PACU, Nursing unit or ICU