

Surgical Safety Checklist

CMC-Pineville

Before Induction of Anesthesia

Nurse and Anesthesia Provider review:

- Patient identification (name and DOB) surgical site
 - Surgical Procedure to be performed matches the consent
 - The site has been marked
 - Known Allergies
 - The anesthesia safety check has been completed
- Has appropriate antibiotic prophylaxis been given within the last 60 minutes?**

- Yes
 - No - If No, plan for redosing discussed
 - N/A & Reason Documented
- Has Beta Blocker been given?**
- Yes
 - No & Reason Documented
 - N/A

Anesthesia Provider discusses patient risk assessment with team:

Anticipated airway or aspiration risk

- Yes
- No

Risk of >500ml Blood Loss

- No
- Yes, if Yes:

Adequate IV access and fluids planned

- Yes
- No

Type and crossmatch/screen

- Yes
- No

Blood availability

- Yes
- No

Risk of hypothermia

- Yes & Warmer in place
- No

Risk of venous thromboembolism

- Yes & SCD's (on & activated) and/or anticoagulants in place
- No

Signature: _____

Before Skin Incision

Surgical Team Performs the Time Out

(Surgeon, Nurse, Scrub Tech and Anesthesia Provider)

- All present "freeze" & "agree" to Time Out
- Team Introduction – "Everyone please state your name and role."
- Patient's name and DOB
- Surgical procedure to be performed
- Surgical site
- Patient Positioning
- Expected Duration/Blood Loss
- Known Allergies
- Antibiotic - Final Confirmation
- Equipment, Implants, & Sterility Verified
- Essential imaging available
- Safe Pass Zone established

Type Surgical Prep Used

- Chloraprep
- Duraprep
- Other _____

Appropriate drying time observed for the surgical prep being used before the patient was draped

- Yes
- No

Anesthesia Team Reviews:

Are there any patient-specific concerns?

- Yes
- No

Surgeon discusses:

Surgical plan & any anticipated difficulties or potential need for additional equipment

- Yes
- No

Attending Surgeon states:

"Does anybody have any concerns? If any team member notices something that concerns you during this case, please speak up."

- Second procedure requires second checklist & timeout

Signature: _____

Before Patient Leaves Room

Nurse reviews with team:

All Instrument, sponge and needle counts are correct

- Yes
- No

All Trial implants, guides & instruments accounted for

- Yes
- No

Are there any equipment, patient safety or PA issues to discuss

- Yes
- No

Specimen labeling

- Yes, Read back specimen labeling including patient's name
- No

Foley Catheter removed

- Yes
- No
- N/A

Debriefing

Surgical Team Discusses:

If anything could have been done to make this case safer or more efficient

- Yes, if Yes, describe _____
- No

Is there anything we could improve upon

- Yes, if Yes, describe _____
- No

Checklist Verification Signature



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