


Name of Policy: <u>Universal Protocol Policy - Comprehensive Surgical Checklist</u> Policy Number: 3364-100-53-05 Department: Hospital Administration Approving Officer: Chief Executive Officer – UTMC, Chief of Staff Responsible Agent: Chief Medical Officer Scope: The University of Toledo Medical Center and its Medical Staff	 Effective Date: 09/01/2020 Initial Effective Date: 5/11/2005				
<table> <tr> <td><input type="checkbox"/> New policy proposal</td> <td><input type="checkbox"/> Minor/technical revision of existing policy</td> </tr> <tr> <td><input checked="" type="checkbox"/> Major revision of existing policy</td> <td><input type="checkbox"/> Reaffirmation of existing policy</td> </tr> </table>		<input type="checkbox"/> New policy proposal	<input type="checkbox"/> Minor/technical revision of existing policy	<input checked="" type="checkbox"/> Major revision of existing policy	<input type="checkbox"/> Reaffirmation of existing policy
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(A) Policy Statement

It is the policy of the Medical Staff and The University of Toledo Medical Center (UTMC) that healthcare providers follow the standards set forth in this document.

(B) Purpose of Policy

The purpose of this policy is to establish processes and highlight responsibilities for conducting the UTMC Comprehensive Surgical Checklist. This checklist is designed to ensure patient safety. Operating room is to follow Surgical Services Policy 3364-100-53-27.

(C) Procedure

1. For Procedures with Anesthesia:

- a. Conduct a Pre-Procedure Verification
- b. Mark the Procedure Site
- ~~a-c.~~ Perform a Time-Out.

2. Pre-procedure Verification. All items will be completed, and discrepancies rectified before moving to the next step.

- a. Location-takes place in the preoperative area
- b. Team members: circulating RN and anesthesia provider; and the patient or his/her representative. If the procedure is being performed under local anesthetic or conscious sedation, the local RN or conscious sedation RN will perform the Pre-procedure check-in with the circulating RN.
- c. Team member responsible for initiating: - circulating RN
- d. Team confirms the following:
 - 1. patient identity using two patient identifiers
 - 2. procedure and procedure site/site
 - 3. completion of consent form(s) (policy 3364-100-10-01)
 - 4. Completion of history and physical and pre-op note if needed (policy 3364-100-45-18)
 - 5. allergies
 - 6. pre-operative RN assessment complete
 - 7. pre-anesthesia assessment complete
 - 8. anesthesia safety check complete
 - 9. pulse oximeter on patient and functioning
 - 10. difficult airway/aspiration risk assessed, and preparation confirmed
 - 11. diagnostic/radiologic test results available
 - 12. need for blood products and number of units available
 - 13. equipment/devices/implants present in procedure room.

3. Marking the procedure site.

- a. The attending surgeon or proceduralist who is ultimately responsible for the procedure and will be present when the procedure is performed will mark the procedure site(s)/side(s) in the preoperative ready area before the patient is taken to the procedure area.
- b. Marking the procedure site will be performed with the active involvement of the patient or his/her representative. The patient will be awake and fully conscious. (Exceptions would be a confused patient).
- c. The attending surgeon or proceduralist will mark the procedure site(s)/side(s) with his/her initials using a surgical marker. Do not mark with an "X".
- d. The site mark(s) must be visible after draping and during the procedure.
- e. Site marking applies to all surgeries or procedures that involve laterality (e.g., limb or pair of organs), multiple surfaces or structures (e.g., flexor/extensor, skin lesions, fingers/toes) or levels (e.g., spine). For spinal procedures, in addition to preoperative skin marking of the general spinal region, special intraoperative imaging techniques may be used for locating and marking the exact vertebral level.
- f. When it is technically or anatomically impossible or impractical to mark the site (e.g., mucosal surfaces, perineum, teeth, premature infants and where marking might permanently discolor the skin), or a patient refuses site marking, the UTMIC form with anatomic diagrams will be used to mark the correct site. The form will be signed, timed and dated by the attending surgeon or proceduralist. The site marking on the diagram will be confirmed by the team during the Pre-procedure check-in and the Time-Out.
- g. Life threatening emergencies, as determined by the attending surgeon or proceduralist, may exempt the patient from site marking

~~2. **Comprehensive surgical checklist.** Informed by the World Health Organization (WHO) and the Joint Commission Universal Protocol, the UTMIC Comprehensive Surgical Checklist serves to ensure patient safety. There are three key elements to the checklist: Pre-procedure check-in, Time-Out, and Sign-out. All three portions will be completed.~~

~~The attending surgeon or proceduralist is responsible for the overall completion of the UTMIC Comprehensive Surgical Checklist.~~

~~3. **Pre-procedure check-in.** All items will be completed and discrepancies rectified before moving to the next step.~~

- a. ~~Location takes place in the preoperative ready area~~
- b. ~~Team members: circulating RN and anesthesia provider; and the patient or his/her representative. If the procedure is being performed under local anesthetic or conscious sedation, the local RN or conscious sedation RN will perform the Pre-procedure check-in with the circulating RN.~~
- e. ~~Team member responsible for initiating: circulating RN~~
- d. ~~Team confirms the following:~~
 1. ~~patient identity using two patient identifiers~~
 2. ~~procedure and procedure site/side~~
 3. ~~completion of consent form(s) (policy 3364-100-10-01)~~
 4. ~~Completion of history and physical and pre-op note if needed (policy 3364-100-45-18)~~
 5. ~~procedure site/side marked by the attending surgeon or proceduralist~~
 6. ~~allergies~~
 7. ~~antibiotics ordered and started~~
 8. ~~pre-operative RN assessment complete~~
 9. ~~pre-anesthesia assessment complete~~
 10. ~~anesthesia safety check complete~~
 11. ~~pulse oximeter on patient and functioning~~
 12. ~~difficult airway/aspiration risk assessed and preparation confirmed~~
 13. ~~diagnostic/radiologic test results available~~
 14. ~~need for blood products and number of units available~~
 15. 1. equipment/devices/implants present in OR room.

4. **3. Time-Out.** All items will be completed and discrepancies rectified before moving to the next step.
- Location-takes place in the procedure room, before skin incision or procedure start.
 - Team Members: circulating RN, anesthesia provider or local RN/conscious sedation RN; and the attending surgeon or proceduralist.
 - Team member responsible for initiating: attending surgeon or proceduralist.
 - The circulating RN is responsible for documenting the Time-Out in the electronic medical record.
 - During the Time-Out process, all other activities are suspended and complete attention of all team members is required.
 - Team confirms the following:
 - team member introductions
 - patient identity using two patient identifiers
 - procedure and procedure site/side
 - completion of consent form(s) (policy 3364-100-10-01)
 - procedure site/side has been marked by the attending surgeon or proceduralist and is visible after draping
 - allergies
 - antibiotic prophylaxis completed before incision/procedure start
 - anticipated blood loss
 - site prepped, dry time met, no pooling, no alcohol prep-soaked materials in room
 - images labeled and displayed
 - equipment/devices/implants in OR room
 - ~~12.~~
 - ~~13.~~12.all team additional concerns addressed
 - ~~14.~~13.Fire risk assessment score
 - g. When two or more procedures are performed on the same patient, and the person performing the procedure changes, a time-out is required before each procedure is initiated.**

5. ~~**Sign Out.** All items will be completed and discrepancies rectified before leaving the procedure room.~~
- ~~Location takes place in the procedure room.~~
 - ~~Team Members: circulating RN, attending surgeon, and anesthesia provider.~~
 - ~~Team member responsible for initiation: circulating RN.~~
 - ~~Team confirms the following: procedure name~~
 - ~~surgical wound classification~~
 - ~~specimens identified and labeled (policy 3364-107-112).~~

6. **5. Marking the procedure site.**

- ~~The attending surgeon or proceduralist who is ultimately responsible for the procedure and will be present when the procedure is performed will mark the procedure site(s)/side(s) in the preoperative ready area before the patient is taken to the operating room or the procedure area.~~
- ~~Marking the procedure site will be performed with the active involvement of the patient or his/her representative. The patient will be awake and fully conscious. (Exceptions would be a confused patient).~~
- ~~The attending surgeon or proceduralist will mark the procedure site(s)/side(s) with his/her initials using a surgical marker. Do not mark with an "X".~~
- ~~The site mark(s) must be visible after draping and during the procedure.~~
- ~~During the Time Out, the attending surgeon or proceduralist will confirm the site mark.~~
- ~~Site marking applies to all surgeries or procedures that involve laterality (e.g., limb or pair of organs), multiple surfaces or structures (e.g., flexor/extensor, skin lesions, fingers/toes) or levels (e.g., spine). For spinal procedures, in addition to preoperative skin marking of the general spinal region, special intraoperative imaging techniques may be used for locating and marking the exact vertebral level.~~

~~g. When it is technically or anatomically impossible or impractical to mark the site (e.g., mucosal surfaces, perineum, teeth, premature infants and where marking might permanently discolor the skin), or a patient refuses site marking, the UTMC form with anatomic diagrams will be used to mark the correct site. The form will be signed, timed and dated by the attending surgeon or proceduralist. The site marking on the diagram will be confirmed by the team during the Pre-procedure check-in and the Time-Out.~~

~~Life threatening emergencies, as determined by the attending surgeon or proceduralist, may exempt the patient from site marking~~

~~h. —. —~~

~~7. The definition of surgical or other invasive procedures for application of Universal Protocol Policy Comprehensive Surgical Checklist are located in the appendix.~~

~~The circulating RN is responsible for the documentation and completion of the UTMC Comprehensive Surgical Checklist.~~

Bedside and Clinic Procedures

Procedures performed at the bedside or in clinics without sedation may only involve the physician or licensed independent practitioner. The time out includes a pause and review with the patient immediately prior to the procedure to confirm the following:

Correct patient identification

Correct procedure consistent with consent

Correct Site (marked as indicated above)

If the patient cannot actively participate in the time out, there must be another provider, nurse, or medical assistant present.

Approved by:		Review/Revision Date: 6/25/2008 5/27/2009 6/22/2011 6/1/2014 11/28/2018 6/1/2020 9/1/2020
_____ Daniel Barbee Chief Executive Officer	_____ Date	
_____ Puneet Sindhwani, MD Chief of Staff	_____ Date	
_____ Michael W. Ellis, MD Chief Medical Officer	_____ Date	
Review/Revision Completed By: Chief Medical Officer		Next Review Date: 09/01/2023
Policies Superseded by This Policy:		

APPENDIX

DEFINITION OF SURGICAL OR OTHER PROCEDURES FOR APPLICATION OF UNIVERSAL PROTOCOL

NOTE of CLARIFICATION: This list is not all-inclusive but is representative of the more common invasive procedures. All invasive procedures require

1. ~~Surgical or other invasive procedures are those involving a skin incision or puncture including insertion of an instrument or foreign material into the body. These procedures expose patients to more than minimal risk and may be performed in settings other than the operating room such as a special procedures unit, endoscopy unit, or interventional radiology suite and include, but are not limited to:~~
 - ~~a. open surgical procedures~~
 - ~~b. percutaneous aspiration of body fluids through the skin (e.g., arthrocentesis, bone marrow aspiration, lumbar puncture, paracentesis, thoracentesis, suprapubic catheterization, and needle biopsy);~~
 - ~~c. biopsy (e.g., breast, liver, muscle, kidney, genitourinary, prostate, bladder, skin, bone marrow);~~
 - ~~d. cardiac procedures (e.g., cardiac catheterization, cardiac pacemaker implantation, angioplasty, stent implantation, intra-aortic balloon catheter insertion);~~
 - ~~e. central vascular access device insertion (e.g., Swan-Ganz catheter, percutaneous intravascular catheter (PIC) line, Hickman catheter);~~
 - ~~f. electrocautery of skin lesion;~~
 - ~~g. endoscopy (e.g., colonoscopy, bronchoscopy, esophagogastric endoscopy, cystoscopy, percutaneous endoscopic, transesophageal, gastrostomy PEG, and J-tube placements, nephrostomy tube placements);~~
 - ~~h. laparoscopic surgical procedures (e.g., laparoscopic colectomy, laparoscopic nephrectomy);~~
 - ~~i. arthroscopy;~~
 - ~~j. invasive radiology procedures (e.g., angiography, angioplasty, percutaneous biopsy);~~
 - ~~k. laser therapy (e.g., eye, ear, nose, and throat);~~
1. ~~Dermatology procedures (biopsy, excision and deep cryotherapy for malignant lesions—excluding cryotherapy for benign lesions);~~
 - ~~m. invasive ophthalmic procedures, including miscellaneous procedures involving implants;~~
 - ~~n. oral surgical procedures including tooth extraction and gingival biopsy;~~
 - ~~o. Podiatric invasive procedures (removal of ingrown toenail, etc.);~~
 - ~~p. skin or wound debridement performed in an operating room;~~
 - ~~q. high risk chemotherapy i.e. vincristine~~
 - ~~r. nerve blocks~~
 - ~~s. interventional pain procedures~~
 - ~~t. injections of any substance into a joint space or body cavity;~~
2. ~~Certain procedures will also be included because of their potential for patient risk and use of technology that is invasive but does not involve a skin puncture or incision. These include but are not limited to:~~
 - ~~a. radiation therapy~~
 - ~~b. lithotripsy~~
 - ~~c. vinca alkaloids.~~

COMPREHENSIVE SURGICAL CHECKLIST

PREPROCEDURE CHECK IN — in PRE-OP	TIME OUT — in OR — STOP ALL ACTIVITIES DURING TIME OUT!	SIGN OUT — in OR										
Time: Just prior to transport to OR room.	Time: After draping & just prior to incision.	Time: When Attending Proceduralist scrubs out.										
Team: Circulator, Anesthesia Provider, Patient or Patient Representative Initiated by: Circulator	Team: Circulator, Anesthesia Provider, Attending Proceduralist Initiated by: Attending Proceduralist <i>*If a patient has 2 or more procedures: perform a time out with each proceduralist.</i>	Team: Circulator, Anesthesia Provider, Attending Proceduralist Initiated by: Circulator										
<input type="checkbox"/> Patient Identity <input type="checkbox"/> Procedure & Site/Side (read from Signed Consent) <input type="checkbox"/> History & Physical Present (& Pre-op Note if needed) Site Marked by Attending Proceduralist <input type="checkbox"/> Yes <input type="checkbox"/> N/A Allergies <input type="checkbox"/> Yes <input type="checkbox"/> N/A Antibiotic Ordered & Started <input type="checkbox"/> Yes <input type="checkbox"/> N/A <input type="checkbox"/> Preoperative RN Assessment Performed <input type="checkbox"/> Pre anesthesia Assessment Performed <input type="checkbox"/> Anesthesia Safety Checks Performed <input type="checkbox"/> Pulse Oximeter on Patient & Functioning Difficult Airway/Aspiration Risk <input type="checkbox"/> No <input type="checkbox"/> Yes & Preparation Confirmed Diagnostic/Radiologic Test Results Available <input type="checkbox"/> Yes <input type="checkbox"/> N/A Blood Products (Risk of Blood Loss >500ml) <input type="checkbox"/> Yes <input type="checkbox"/> N/A # of units available _____ Equipment/Devices/Implants/Sterile Instruments Present in Procedure Room <input type="checkbox"/> Yes <input type="checkbox"/> N/A	<input type="checkbox"/> Team Member Introduction <input type="checkbox"/> Patient Identity <input type="checkbox"/> Procedure & Site/Side (read from Signed Consent) Site Marked by Attending Proceduralist & Visible After Draping <input type="checkbox"/> Yes <input type="checkbox"/> N/A Allergies <input type="checkbox"/> Yes <input type="checkbox"/> N/A Anesthesia Provider: Antibiotic Completed Before Incision <input type="checkbox"/> Yes <input type="checkbox"/> N/A Surgeon: <input type="checkbox"/> Anticipated Blood Loss Circulator: Site Prepped/Dry Time Met/No Pooling/No Alcohol Prep-soaked Materials in Room <input type="checkbox"/> Yes <input type="checkbox"/> N/A Images Labeled & Displayed <input type="checkbox"/> Yes <input type="checkbox"/> N/A Equipment/Devices/Implants in Room <input type="checkbox"/> Yes <input type="checkbox"/> N/A Fire Risk Assessment Score <input type="checkbox"/> 1 or less: Low Risk <input type="checkbox"/> 2: Moderate Risk <input type="checkbox"/> 3 or more: High Risk Any Additional Concerns <input type="checkbox"/> Yes <input type="checkbox"/> N/A	<input type="checkbox"/> Confirm Procedure Name <input type="checkbox"/> Confirm Wound Classification <input type="checkbox"/> Specimens Identified & Labeled <input type="checkbox"/> Yes <input type="checkbox"/> N/A <div style="border: 2px solid red; padding: 10px;"> FIRE RISK ASSESSMENT <table> <tr> <td>Procedure Site</td><td>Above Xiphoid = 1 Below Xiphoid = 0</td></tr> <tr> <td>Open Oxygen</td><td>Face Mask/Nasal Cannula = 1 None = 0</td></tr> <tr> <td>Ignition Source</td><td>Cautery/Fiberoptic Light Source/Laser = 1 Bi-polar/None = 0</td></tr> <tr> <td>Skin Prep Solution</td><td>Alcohol-based/Other Volatile Chemical = 1 Non-volatile Chemical/None = 0</td></tr> <tr> <td>Other Equipment</td><td>Defibrillator/Drills/Saws/Burrs = 1 None = 0</td></tr> </table> FIRE RISK ASSESSMENT SCORE 0 or less: Low risk 2: Moderate risk 3 or more: High risk </div>	Procedure Site	Above Xiphoid = 1 Below Xiphoid = 0	Open Oxygen	Face Mask/Nasal Cannula = 1 None = 0	Ignition Source	Cautery/Fiberoptic Light Source/Laser = 1 Bi-polar/None = 0	Skin Prep Solution	Alcohol-based/Other Volatile Chemical = 1 Non-volatile Chemical/None = 0	Other Equipment	Defibrillator/Drills/Saws/Burrs = 1 None = 0
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