# **Surgical Safety Checklist**



## Before induction of anaesthesia **Before skin incision** (with at least nurse and anaesthetist) Has the patient confirmed his/her identity, site, procedure, and consent? Is the site marked? the last 60 minutes? ☐ Yes Is the anaesthesia machine and medication Not applicable check complete? **Anticipated Critical Events** Is the pulse oximeter on the patient and To Surgeon: How long will the case take? Does the patient have a: To Anaesthetist: To Nursing Team: Difficult airway or aspiration risk? Yes, and equipment/assistance available Risk of >500ml blood loss (7ml/kg in children)?

□ No

Yes

Yes

Yes

Yes

No Yes

□ No

functionina?

**Known allergy?** 

□ Not applicable

Yes, and two IVs/central access and fluids planned

(with nurse, anaesthetist and surgeon)

Confirm all team members have introduced themselves by name and role.

Confirm the patient's name, procedure, and where the incision will be made.

## Has antibiotic prophylaxis been given within

- What are the critical or non-routine steps?
- What is the anticipated blood loss?
- Are there any patient-specific concerns?
- Has sterility (including indicator results) been confirmed?
- Are there equipment issues or any concerns?

#### Is essential imaging displayed?

- Yes
- Not applicable

## Before patient leaves operating room

(with nurse, anaesthetist and surgeon)

#### **Nurse Verbally Confirms:**

- □ The name of the procedure
- Completion of instrument, sponge and needle counts
- Specimen labelling (read specimen labels aloud,  $\square$ including patient name)
- Whether there are any equipment problems to be addressed

#### **To Surgeon, Anaesthetist and Nurse:**

□ What are the key concerns for recovery and management of this patient?

Date	1	1		Time	ne :		am/pm	
Child Name								
Surgery Name								
Age				Sex			Sign	
Surgeon	1							
Assistan	t							
Anaesth	etist							
Scrub N	urse							
Runner								