

Pediatric Surgical Safety Checklist

-SIGN IN-

(TO BE COMPLETED BEFORE INDUCTION OF ANESTHESIA)

THE ANESTHESIOLOGIST & CIRCULATING NURSE WILL TOGETHER CONFIRM:

1. Correct patient using 2 identifiers
2. Procedure(s) that will be performed
3. Patient's weight for medication dosing
4. Whether patient has any medication allergies

THE ANESTHESIOLOGIST WILL CONFIRM:

1. Anesthesia machine has been checked
2. The pulse oximeter is on and functioning
3. Need to prepare for a difficult airway
4. IV Access is adequate for above procedure(s)

THE CIRCULATING NURSE WILL CONFIRM:

1. Operative site has been marked by surgeon
2. Warming devices in place if needed

-TIME OUT-

(TO BE COMPLETED BEFORE PROCEDURE BEGINS)

ALL TEAM MEMBERS WILL INTRODUCE THEMSELVES BY NAME & ROLE

THE SURGEON WILL CONFIRM:

1. Correct patient/procedure/site & position
2. Site marking is visible in the prepped field
3. Expected duration of procedure(s)
4. Anticipated blood loss
5. Relevant studies & labs have been reviewed
6. All special equipment/implants are available
7. Equipment settings (e.g. Bovie current)

THE ANESTHESIOLOGIST WILL CONFIRM:

1. Antibiotics given within 1 hour of incision
2. Antibiotic re-dosing plan if duration > 4 hrs?
3. Ventilation plan and any airway concerns
4. Need & availability of blood products

THE CIRCULATING NURSE WILL CONFIRM:

1. Consent matches procedure(s) verbalized above
2. All medications & solutions on field are labeled
4. Sterility of instruments & implants

STOP!

HAS EACH TEAM MEMBER CONFIRMED THAT THERE ARE NO CONCERNS WITH PROCEEDING?

-SIGN OUT-

(TO BE COMPLETED BEFORE PATIENT LEAVES THE OPERATING ROOM)

THE SURGEON WILL CONFIRM:

1. The name(s) of all procedures performed
2. EBL and concerns for ongoing blood loss
2. Equipment issues to be addressed

THE CIRCULATING NURSE WILL CONFIRM:

1. Final sponge, instrument & needle counts
2. Correct labeling of all specimens

THE ANESTHESIOLOGIST WILL CONFIRM:

1. Airway concerns during recovery period

THE ANESTHESIOLOGIST & SURGEON WILL TOGETHER REVIEW:

1. Patient disposition
2. Need and timing for post-op labs & imaging
2. Plan for communicating key recovery issues to accepting team (safe hand-off)