

Surgical safety checklist and briefings

Start-of-list briefing

1 Introductions

Ensure all team members are present and have introduced themselves

Indicate that debriefing will take place at the end of the list

2 List outline

Provide an overview of:

- The cases on the list
- Anticipated duration
- Any changes or modifications to list
- Any uncertainties, and identify ways of updating information during the day
- Any other patient information not already noted on the list/notes

3 Case events

Review the details for each case:

- Patient name
- Planned procedure
- Estimated duration

Surgical plan:

- Key points and any specific requirements not already identified
- Blood loss risk
- Potential difficulties and contingency plans
- Confirm specific equipment requirements

Anaesthetic plan:

- Type of anaesthetic
- Any issues or concerns
- Difficult airway or aspiration risk

Repeat Step 3 for every case

4 Staffing & questions

Confirm everyone is clear on their roles and responsibilities

Ask team if they have any questions or concerns

Surgical safety checklist

1 Sign in

Confirm surgeon available Before induction of anaesthesia, confirm with patient:

- Identity
- Site and side
- Procedure
- Consent

Site marked or not applicable

Does the patient have:

Known allergies?

Difficult airway or aspiration risk?

If yes, is equipment/assistance available?

Risk of >500 ml blood loss recorded (7 ml/kg in children)?

If yes, are adequate intravenous access and fluids planned?

Anaesthesia safety checklist completed

Check and confirm prosthesis/special equipment to be used

2 Time out

Before an incision, confirm all team members have introduced themselves by name and role

Surgeon, anaesthetist, and nurse verbally confirm:

- Patient
- Site and side
- Procedure
- Consent
- Any known allergies

Anticipated critical events

Surgeon reviews:

Critical or unexpected steps, operative duration, anticipated blood loss?

Anaesthesia team reviews:

Patient specific concerns?
Has the ASA score been recorded?

Nursing team reviews:

Has sterility (including indicator results) been confirmed?
Are there equipment issues or concerns?

Has antibiotic prophylaxis been given within the last 60 minutes?

Has the plan for VTE prophylaxis during the operation been carried out?

Is essential imaging displayed?

3 Sign out

Verbally confirm with the team after final count:

- The name of the procedure recorded
- That instrument, needle, sponge and other counts are correct
- How the specimen is labelled (including patient name)
- The plan for ongoing VTE prophylaxis
- Whether there are any equipment problems to be addressed
- Postoperative concerns/plan for recovery and management of this patient

End-of-list debriefing

Wrap-up

Ensure all members of the operating team are present



What happened?

What went well? What did not go well?



Why?



Suggestions for improvement

What can we do better next time?