

Surgical Safety Team Communication

BEFORE INDUCTION OF ANESTHESIA

Anesthesia: We are going to go over a checklist to provide the safest possible care.

Anesthesia leads

- Patient/staff has confirmed:
 - Identification (name/DOB)
 - Procedure
 - Side/site
 - Allergies
- Consent verifies procedure?
- Consent for blood or blood refusal?
- Site/side is initialed?
- OR equipment available/working?
- Surgeon present in facility?
- Monitors applied and functioning
- Anesthesia equipment and medical check complete
- Special airway equipment
- Antibiotic prophylaxis ordered/initiated (60min)

BEFORE SKIN INCISION

Surgeon arrives: Team introductions begin followed by confirmation of items and anticipated critical steps.

Surgeon leads

- Introductions: All team members
 - Please state name and role
- Surgeon confirms with OR team:
 - Patient name, procedure
 - Operative side & site/mark visible
 - Correct positioning (patient/table)
 - Relevant images available/labelled?
 - Implants available?
 - Specimen collection
 - Length of case/critical steps

Anesthesia reviews

- ASA
- Antibiotic given or N/A
- IV access/fluids/blood products
- Specific patient concerns

OR staff reviews

- Sterility/equipment/irrigation solutions
- Fire Risk Assessment score

Team verbally agrees or corrects discrepancies

BEFORE PATIENT LEAVES ROOM

Circulator confirms items with surgeon / OR team before patient leaves OR.

Circulator leads

- Nurse confirms with OR team:
 - Procedure name?
 - Specimen(s)/labelling?
 - Estimated blood loss?
 - Any equipment/pick list issues?
 - Postop concerns?
 - Wound packing/dressing?
- Counts complete (instrument, sponge, needle)
- Anesthesia reviews
 - Transfer to ____/oxygen needed

 *Info from anesthesia provider.*

 *Info from surgeon.*

 *Info from circulator/OR staff.*

Team members are encouraged to speak up when any problems are noted.