# Appendix D. Ambulatory Surgery Center Checklist Template

**Ambulatory Surgery Checklist**

**Preop**

#### **Before Patient Enters Room**

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| **Nurse, Anesthesia Professional, and Patient Review:**   * Patient identification (name and date of birth) * Surgical site * Surgical procedure to be performed matches the consent form * Site is marked by individual performing the procedure * Patient position * Known allergies * Patient weight * History and physical |
| **Nurse and Anesthesia Professional Discuss:**   * Implants available in the operating room * Correct type and size * Essential imaging available * Risk of hypothermia – operation longer than 1 hour * Warmer in place * Risk of venous thromboembolism * Compression boots and/or anticoagulants in place * Anesthesia safety check completed * Type of anesthesia * Anticipated airway and aspiration risk * Changes in patient’s cardiac history * Changes in patient’s respiratory history |

***This checklist is not intended to be comprehensive. Additions and modifications to fit local practice are encouraged.***

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**Ambulatory Surgery Checklist**

**Operating Room**

#### **Before Skin Incision**

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| **Entire Surgical Team**   * **Is everyone ready to perform the Timeout?** * **Please state your name and role.**   **Surgeon, Nurse, and Anesthesia Professional perform the Timeout**   * Patient’s name * Surgical procedure to be performed matches the consent * Surgical site |
| * **Has antibiotic prophylaxis been given within the last 60 minutes, if indicated?** |

#### **Briefing**

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| **Surgeon Shares:**   * Any changes to operative plan and possible difficulties   **Anesthesia Professional Shares:**   * Anesthetic plan * Airway and other concerns   **Circulating Nurse and Scrub Tech Share:**   * Equipment issues * Other concerns   **Circulating Nurse and Scrub Tech Confirm:**   * All medications are correct and labeled * Implant type and size   **Surgeon States:**  “Does anybody have any concerns? If you see something that concerns you during this case, please speak up.” |

#### **Before Patient Leaves Room/Debriefing**

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| **Nurse Reviews With Team:**   * Instrument, sponge and needle counts are correct * Name of the procedure performed * Specimen labeling * Read back specimen labeling including patient’s name |
| **Surgical Team Discusses:**   * **Equipment problems that need to be addressed** * **Key concerns for patient recovery and management** * **If anything can be done to make the next case safer or more efficient** |

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