

AHS Safe Surgery Checklist (SSC) – C-Section

Before Induction of Anesthesia	Before Skin Incision	Before Patient Leaves Operating Room
Briefing	Time Out	Debriefing
Patient (family member) and surgical team members have verbally confirmed: <ul style="list-style-type: none"> • Patient identity • Procedure & Indication for C-Section • Pertinent maternal/fetal history • Consent(s) <ul style="list-style-type: none"> • Are other procedures planned (i.e. Tubal ligation) • Known allergies and reactions 	All Surgical team members have introduced themselves by name and role Surgeon, Anesthesiologist, and Nurse have verbally confirmed: <ul style="list-style-type: none"> • Patient • Procedure 	Surgical team have verbally confirmed: <ul style="list-style-type: none"> • Name of the procedure <ul style="list-style-type: none"> • Concerns Requiring Follow-up • Applicable sponge, needle and instrument counts • Specimen labeling and handling • Equipment problems addressed • Estimated Blood Loss <ul style="list-style-type: none"> • Volume replacement if excessive • VTE prophylaxis (heparin/mechanical)
Special precautions <ul style="list-style-type: none"> • Malignant hyperthermia • Latex • Isolation • Other 	Anticipated critical events: <ul style="list-style-type: none"> • Surgeon review: <ul style="list-style-type: none"> • Critical or unexpected steps • Risk of >1000mL blood loss • Anesthesiologist review: <ul style="list-style-type: none"> • Patient-specific concerns • Adequate intravenous access and fluid planned • Antibiotic prophylaxis given within last 60 minutes • Nursing review: <ul style="list-style-type: none"> • Sterility issues • Equipment issues • Applicable medication concerns: <ul style="list-style-type: none"> • VTE prophylaxis ordered: • Mechanical • Other specific medication concerns 	Surgical team has reviewed recovery plan: <ul style="list-style-type: none"> • Neonate identification complete • Patient & neonate disposition • Analgesia • O₂ needs for transfer <ul style="list-style-type: none"> • Specific concerns <ul style="list-style-type: none"> • Neonatal concerns • RH Factor • Other relevant testing as required
BMI and weight (kg) recorded on chart <ul style="list-style-type: none"> • operative risk if BMI >35 	<ul style="list-style-type: none"> • Neonatal personnel or designate present and given report (Neo/peds if required) • Resuscitation equipment checked 	
Anesthesia safety and equipment check completed	Any other questions or concerns before proceeding?	
Difficult airway/aspiration risk <ul style="list-style-type: none"> • Applicable equipment / assistance available 		
Relevant/special equipment confirmed & in room: <ul style="list-style-type: none"> • Warming devices • Vacuum/forceps Setup • VTE prophylaxis (mechanical) 		
Relevant tests completed and checked: <ul style="list-style-type: none"> • Laboratory <ul style="list-style-type: none"> • HGB • Platelets (PLT) • Type & Screen (Crossmatch if required) • Ultrasound (if applicable) • Confirm Neonatal personnel or designate notified? (if required) 		