

FIRST STEP:

Designate Checklist Lead (CL) for each section of the SSC.

1. It must be a member of the surgical team.
2. The CL will be appointed for an entire operative session.
3. All three members must be present for each phase (Surgeon, Anesthesiologist and Nurse).

2. Time Out:

- **Directly after induction of anesthesia, before incision/ insertion.**
- **Surgeon, Anesthesiologist and Nurse are present.**
 1. CL initiates time-out.
 2. Each member of the team introduces themselves by name and role.
 3. Pause before incision to confirm **out loud** that the correct operation is being performed on the correct patient and site.
 4. Verbal team-briefing on intended procedure, critical steps, concerns, anticipated events and equipment.
 5. CL confirms that:
 - a. Prophylactic antibiotic has been given (within 60 minutes procedure), if required;
 - b. Thromboprophylaxis has been ordered/ given (specify if pharmacological or mechanical), if required; and,
 - c. Essential imaging is displayed and matches the patient's ID.

1. Briefing:

- **Directly before induction of anesthesia.**
- **Surgeon, Anesthesiologist and Nurse are present.**
 1. Confirm Patient ID and procedure **with patient**.*
 - a. What is your FULL name? (ask to spell if unclear)
 - b. What is your Date of Birth?
 - c. What procedure are you here for? What site/site?
 2. Verify that the consent has been provided and that the ID, procedure and site specified on the form matches ⇒ verbal confirmation.**
 3. Visual confirmation of site marking (if appropriate).***
 4. Full anesthesia check completed by anesthesia team.
 5. Surgeon discusses the operative plan ⇒ expected duration of the procedure.
 6. Confirm with Anesthesiologist: risk of blood loss (ensure group/screen and/or cross match available), airway problems or allergic reactions.
 7. Confirm that special equipment/ prosthesis has been checked.

* Can be legal guardian/ family member ⇒ as per AHS identifier policy

** Refer to AHS consent policy

*** "Left" and "Right" must always be written in full in documentation;
Reference to AHS User Manual

3. De-Briefing:

- **Immediately after completion of procedure and/or wound closure**
- **Surgeon, Anesthesiologist and Nurse are present**
 1. CL verbally confirms with the team:
 - a. Name of procedure is recorded (this may be different from the operation initially planned);
 - b. Sponge and instrument count ⇒ if not reconciled appropriate steps are taken;
 - c. Specimen labeling (Name, DOB, etc); and,
 - d. Any instrument/ equipment problems.
 2. Team reviews and documents key plans and concerns regarding post-op management/ recovery before patient leaves operating room.
 3. CL signs off on the completion of all 3 steps (electronically/ manually) on the patient's record.