

3. **Time-Out.** All items will be completed and discrepancies rectified before moving to the next step.
 - a. Location-takes place in the procedure room, before skin incision or procedure start.
 - b. Team Members: circulating RN, anesthesia provider or local RN/conscious sedation RN; and the attending surgeon or proceduralist.
 - c. Team member responsible for initiating: attending surgeon or proceduralist.
 - d. The circulating RN is responsible for documenting the Time-Out in the electronic medical record.
 - e. During the Time-Out process, all other activities are suspended and complete attention of all team members is required.
 - f. Team confirms the following:
 1. team member introductions
 2. patient identity using two patient identifiers
 3. procedure and procedure site/side
 4. completion of consent form(s) (policy 3364-100-10-01)
 5. procedure site/side has been marked by the attending surgeon or proceduralist and is visible after draping
 6. allergies
 7. antibiotic prophylaxis completed before incision/procedure start
 8. anticipated blood loss
 9. site prepped, dry time met, no pooling, no alcohol prep-soaked materials in room
 10. images labeled and displayed
 11. equipment/devices/implants in OR room
 - 12.
 13. all team additional concerns addressed
 14. Fire risk assessment score

4. **Sign-Out.** All items will be completed and discrepancies rectified before leaving the procedure room.
 - a. Location-takes place in the procedure room.
 - b. Team Members: circulating RN, attending surgeon, and anesthesia provider.
 - c. Team member responsible for initiation: -circulating RN.
 1. Team confirms the following: procedure name
 2. surgical wound classification
 3. specimens identified and labeled (policy 3364-107-112).

5. **Marking the procedure site.**
 - a. The attending surgeon or proceduralist who is ultimately responsible for the procedure and will be present when the procedure is performed will mark the procedure site(s)/side(s) in the preoperative ready area before the patient is taken to the operating room or the procedure area.
 - b. Marking the procedure site will be performed with the active involvement of the patient or his/her representative. The patient will be awake and fully conscious. (Exceptions would be a confused patient).
 - c. The attending surgeon or proceduralist will mark the procedure site(s)/side(s) with his/her initials using a surgical marker. Do not mark with an "X".
 - d. The site mark(s) must be visible after draping and during the procedure.
 - e. During the Time-Out, the attending surgeon or proceduralist will confirm the site mark.
 - f. Site marking applies to all surgeries or procedures that involve laterality (e.g., limb or pair of organs), multiple surfaces or structures (e.g., flexor/extensor, skin lesions, fingers/toes) or levels (e.g., spine). For spinal procedures, in addition to preoperative skin marking of the general spinal region, special intraoperative imaging techniques may be used for locating and marking the exact vertebral level.
 - g. When it is technically or anatomically impossible or impractical to mark the site (e.g., mucosal surfaces, perineum, teeth, premature infants and where marking might permanently discolor the skin), or a patient refuses site marking, the UTMC form with anatomic diagrams will be used to mark the correct site. The form will be signed, timed and dated by the attending surgeon or proceduralist. The site marking on the diagram will be confirmed by the team during the Pre-procedure check-in and the Time-Out.
 - h. Life threatening emergencies, as determined by the attending surgeon or proceduralist, may exempt the patient from site marking.

APPENDIX

DEFINITION OF SURGICAL OR OTHER PROCEDURES FOR APPLICATION OF UNIVERSAL PROTOCOL

NOTE of CLARIFICATION: This list is not all inclusive but is representative of the more common invasive procedures. All invasive procedures require

1. Surgical or other invasive procedures are those involving a skin incision or puncture including insertion of an instrument or foreign material into the body. These procedures expose patients to more than minimal risk and may be performed in settings other than the operating room such as a special procedures unit, endoscopy unit, or interventional radiology suite and include, but are not limited to:
 - a. open surgical procedures
 - b. percutaneous aspiration of body fluids through the skin (e.g., arthrocentesis, bone marrow aspiration, lumbar puncture, paracentesis, thoracentesis, suprapubic catheterization, and needle biopsy);
 - c. biopsy (e.g., breast, liver, muscle, kidney, genitourinary, prostate, bladder, skin, bone marrow);
 - d. cardiac procedures (e.g., cardiac catheterization, cardiac pacemaker implantation, angioplasty, stent implantation, intra-aortic balloon catheter insertion);
 - e. central vascular access device insertion (e.g., Swan-Ganz catheter, percutaneous intravascular catheter (PIC) line, Hickman catheter);
 - f. electrocautery of skin lesion;
 - g. endoscopy (e.g., colonoscopy, bronchoscopy, esophagogastric endoscopy, cystoscopy, percutaneous endoscopic, transesophageal, gastrostomy PEG, and J-tube placements, nephrostomy tube placements);
 - h. laparoscopic surgical procedures (e.g., laparoscopic colectomy, laparoscopic nephrectomy);
 - i. arthroscopy;
 - j. invasive radiology procedures (e.g., angiography, angioplasty, percutaneous biopsy);
 - k. laser therapy (e.g., eye, ear, nose, and throat);
 - l. Dermatology procedures (biopsy, excision and deep cryotherapy for malignant lesions - excluding cryotherapy for benign lesions);
 - m. invasive ophthalmic procedures, including miscellaneous procedures involving implants;
 - n. oral surgical procedures including tooth extraction and gingival biopsy,
 - o. Podiatric invasive procedures (removal of ingrown toenail, etc.);
 - p. skin or wound debridement performed in an operating room;
 - q. high risk chemotherapy i.e. vincristine
 - r. nerve blocks
 - s. interventional pain procedures
 - t. injections of any substance into a joint space or body cavity;
2. Certain procedures will also be included because of their potential for patient risk and use of technology that is invasive but does not involve a skin puncture or incision. These include but are not limited to:
 - a. radiation therapy
 - b. lithotripsy
 - c. vinca alkaloids.

COMPREHENSIVE SURGICAL CHECKLIST



PREPROCEDURE CHECK-IN – in PRE-OP	TIME-OUT – in OR STOP ALL ACTIVITIES DURING TIME-OUT!	SIGN-OUT – in OR
Time: Just prior to transport to OR room.	Time: After draping & just prior to incision.	Time: When Attending Proceduralist scrubs out.
Team: Circulator, Anesthesia Provider, Patient or Patient Representative Initiated by: Circulator	Team: Circulator, Anesthesia Provider, Attending Proceduralist Initiated by: Attending Proceduralist <i>*If a patient has 2 or more procedures: perform a time-out with each proceduralist.</i>	Team: Circulator, Anesthesia Provider, Attending Proceduralist Initiated by: Circulator
<input type="checkbox"/> Patient Identity <input type="checkbox"/> Procedure & Site/Side (read from Signed Consent) <input type="checkbox"/> History & Physical Present (& Pre-op Note if needed) Site Marked by Attending Proceduralist <input type="checkbox"/> Yes <input type="checkbox"/> N/A Allergies <input type="checkbox"/> Yes <input type="checkbox"/> N/A Antibiotic Ordered & Started <input type="checkbox"/> Yes <input type="checkbox"/> N/A <input type="checkbox"/> Preoperative RN Assessment Performed <input type="checkbox"/> Pre-anesthesia Assessment Performed <input type="checkbox"/> Anesthesia Safety Checks Performed <input type="checkbox"/> Pulse Oximeter on Patient & Functioning Difficult Airway/Aspiration Risk <input type="checkbox"/> No <input type="checkbox"/> Yes & Preparation Confirmed Diagnostic/Radiologic Test Results Available <input type="checkbox"/> Yes <input type="checkbox"/> N/A Blood Products (Risk of Blood Loss >500ml) <input type="checkbox"/> Yes <input type="checkbox"/> N/A # of units available _____ Equipment/Devices/Implants/Sterile Instruments Present in Procedure Room <input type="checkbox"/> Yes <input type="checkbox"/> N/A	<input type="checkbox"/> Team Member Introduction <input type="checkbox"/> Patient Identity <input type="checkbox"/> Procedure & Site/Side (read from Signed Consent) Site Marked by Attending Proceduralist & Visible After Draping <input type="checkbox"/> Yes <input type="checkbox"/> N/A Allergies <input type="checkbox"/> Yes <input type="checkbox"/> N/A Anesthesia Provider: Antibiotic Completed Before Incision <input type="checkbox"/> Yes <input type="checkbox"/> N/A Surgeon: <input type="checkbox"/> Anticipated Blood Loss Circulator: Site Prepped/Dry Time Met/No Pooling/No Alcohol Prep-soaked Materials in Room <input type="checkbox"/> Yes <input type="checkbox"/> N/A Images Labeled & Displayed <input type="checkbox"/> Yes <input type="checkbox"/> N/A Equipment/Devices/Implants in Room <input type="checkbox"/> Yes <input type="checkbox"/> N/A Fire Risk Assessment Score  <input type="checkbox"/> 1 or less: Low Risk <input type="checkbox"/> 2: Moderate Risk <input type="checkbox"/> 3 or more: High Risk Any Additional Concerns <input type="checkbox"/> Yes <input type="checkbox"/> N/A	<input type="checkbox"/> Confirm Procedure Name <input type="checkbox"/> Confirm Wound Classification Specimens Identified & Labeled <input type="checkbox"/> Yes <input type="checkbox"/> N/A <div style="border: 2px solid red; padding: 5px;"> <p style="text-align: center; color: red; margin: 0;">FIRE RISK ASSESSMENT</p> <p>Procedure Site Above Xiphoid = 1 Below Xiphoid = 0</p> <p>Open Oxygen Face Mask/Nasal Cannula = 1 None = 0</p> <p>Ignition Source Cautery/Fiberoptic Light Source/Laser = 1 Bi-polar/None = 0</p> <p>Skin Prep Solution Alcohol-based/Other Volatile Chemical = 1 Non-volatile Chemical/None = 0</p> <p>Other Equipment Defibrillator/Drills/Saws/Burrs = 1 None = 0</p> <p style="text-align: center; color: red; margin-top: 10px;">FIRE RISK ASSESSMENT SCORE</p> <p style="text-align: center;">0 or less: Low risk 2: Moderate risk 3 or more: High risk</p> </div>