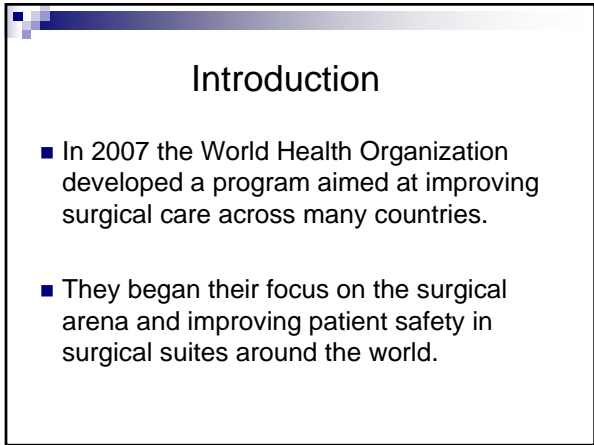


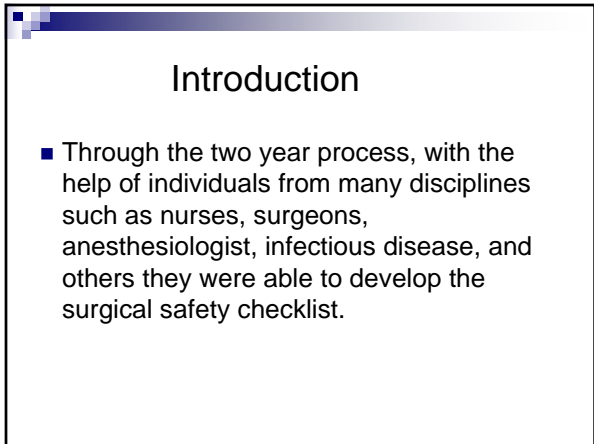
**WHO Surgical
Safety Checklist**

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Introduction

- In 2007 the World Health Organization developed a program aimed at improving surgical care across many countries.
- They began their focus on the surgical arena and improving patient safety in surgical suites around the world.



Introduction

- Through the two year process, with the help of individuals from many disciplines such as nurses, surgeons, anesthesiologist, infectious disease, and others they were able to develop the surgical safety checklist.

Introduction

- The development of the checklist was based on sentinel events, root cause analysis (RCA) and communication problems

Development

- Creating the checklist starts with building a team
- Identifying these key team members
- Identify a core group of people from all clinical disciplines in the discussion.

Development Team

- OR Director
- OR Educator
- OR Manager
- Two OR nurses
- Two OR techs
- Anesthesia

Development

- WHO recommendations critical areas
- Brain storm regarding organization's needs
- Create mock up of checklist

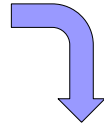
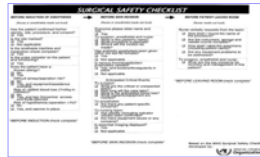
Development

- Each organization can do what it finds best suited for them. Some organizations use a Universal Protocol format to complete and document their checklist. What ever you decide to do it is important to keep in mind compliance.

Development

- The Universal Protocol checklist was developed based on Joint Commission standards
- The WHO Surgical Safety Checklist was developed based on recommendations from international organizations

We went from this...



...to this. 😊

WHO Surgical Safety Checklist		
Pre-induction	Pre-incision	Before Leaving room
Pt. Name _____	Site, RN _____	Final Procedure identified & signed-off _____
Case #/ID# _____	Spine _____	No Yes
Allegation _____	Asst. _____	Any equipment problems to be addressed _____
Difficult Airway _____	Surgeon _____	Any key concerns for patient's recovery _____
Risk No Yes	ASST _____	Cardiothoracic only _____
>500 ml Blood Loss Risk No Yes	U/S _____	Breast/Colon _____
Risk of Hip/Trauma _____	Antibiotic Yes No _____	Other _____
Time out _____	Surg. Time Out @ _____	Other _____
	VTE Prophylaxis N/A Yes No _____	
	Pt. Specific Concerns _____	

Development

- The checklist should be created so that it is user friendly.
- It needs to include only the pertinent data and not be lengthy to ensure completion of the checklist.

Implementation

- Pilot the checklist board in one designated OR suite
- Pilot project should run over two weeks to ensure all staff use the boards

Implementation

- Implementation must include education of the staff.
- Each box should be defined and discussed
- Be sure to include the Surgeon and Anesthesiologist

Implementation

- Once the two week pilot project is complete engage the staff in a debriefing
- Communication and discussion are key to successful implementation
- Work out the “kinks” so that staff use the board. The board should be user friendly.

Evaluation

- Collect data with regards to the completion of the checklist
- Ask for feedback, i.e. challenges, successes

Evaluation

- Celebrate your successes and acknowledge those who had direct impact on the checklist project.
- Continue to collect data and share outcomes

WHO Surgical Safety Checklist

Pre-Induction	Pre-Incision	Before Leaving room
Pt. Name _____	Circ. RN _____	Final Procedure clarified & agreed upon. No Yes
Date of Birth _____	Scrub _____	
Allergies _____	Anesth _____	Any equipment problems to be addressed: _____
Difficult Airway Risk No Yes <small>Equip Avail</small>	Surgeon _____	
>500 ml Blood Loss Risk No Yes <small>IV access Adequate</small>	Add'l _____	Any key concerns for patient's recovery: _____
Risk of Hypo-Thermia <small>(+1 hr. case)</small> No Yes <small>Warmer in Place</small>	I.V. Antibiotic N/A Given @ _____	
Let not the urgent crowd out the important. Do no harm.	Surg. Time-Out @ _____	Cardiothoracic only: Betablockers given @ _____
	VTE Precautions N/A Yes <small>(circle one) SCD Anticoag</small>	
Pt. Specific Concerns: _____		

WHO Surgical Safety Checklist

Pre-Induction	Pre-Incision	Before Leaving room
Pt. Name <u>Rose Jones</u>	Circ. RN _____	Final Procedure clarified & agreed upon. No Yes
Date of Birth <u>1/28/52</u>	Scrub _____	
Allergies <u>Lofex</u>	Anesth _____	Any equipment problems to be addressed: _____
Difficult Airway Risk No Yes <small>Equip Avail</small>	Surgeon _____	
>500 ml Blood Loss Risk No Yes <small>IV access Adequate</small>	Add'l _____	Any key concerns for patient's recovery: _____
Risk of Hypo-Thermia <small>(+1 hr. case)</small> No Yes <small>Warmer in Place</small>	I.V. Antibiotic N/A Given @ _____	
Let not the urgent crowd out the important. Do no harm.	Surg. Time-Out @ _____	Cardiothoracic only: Betablockers given @ _____
	VTE Precautions N/A Yes <small>(circle one) SCD Anticoag</small>	
Pt. Specific Concerns: _____		

WHO Surgical Safety Checklist		
Pre-Induction	Pre-Incision	Before Leaving room
Pt. Name <u>Rose Jones</u>	Circ. RN <u>James</u>	Final Procedure clarified & agreed upon.
Date of Birth <u>1/28/52</u>	Scrub <u>Sara</u>	No <input type="checkbox"/> Yes <input type="checkbox"/>
Allergies <u>Latex</u>	Anesth. <u>Dr. Paul</u>	Any equipment problems to be addressed:
Difficult Airway Risk <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes (Equip Avail)	Surgeon <u>Dr. Simpson</u>	_____
>500 ml Blood Loss Risk <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes (IV access Adequate)	Add'l <u>Susan RNFA</u>	Any key concerns for patient's recovery:
Risk of Hypo-Thermia (>1 hr case) <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes (Warmer in Place)	I.V. Antibiotic N/A Given @ <u>1330</u>	_____
Let not the urgent crowd out the important. Do no harm.	Surg. Time-Out @ <u>1405</u>	Cardiothoracic only: Betablockers given @ _____
	VTE Precautions N/A <input checked="" type="checkbox"/> Yes (SCD Anticoag)	
	Pt. Specific Concerns: <u>S/P left TBR, protect L knee</u>	

WHO Surgical Safety Checklist		
Pre-Induction	Pre-Incision	Before Leaving room
Pt. Name <u>Rose Jones</u>	Circ. RN <u>James</u>	Final Procedure clarified & agreed upon.
Date of Birth <u>1/28/52</u>	Scrub <u>Sara</u>	No <input type="checkbox"/> Yes <input checked="" type="checkbox"/>
Allergies <u>Latex</u>	Anesth. <u>Dr. Paul</u>	Any equipment problems to be addressed:
Difficult Airway Risk <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes (Equip Avail)	Surgeon <u>Dr. Simpson</u>	<u>Overhead light drifting</u>
>500 ml Blood Loss Risk <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes (IV access Adequate)	Add'l <u>Susan RNFA</u>	Any key concerns for patient's recovery:
Risk of Hypo-Thermia (>1 hr case) <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes (Warmer in Place)	I.V. Antibiotic N/A Given @ <u>1330</u>	<u>Hx N&V prior surgery</u>
Let not the urgent crowd out the important. Do no harm.	Surg. Time-Out @ <u>1405</u>	Cardiothoracic only: Betablockers given @ _____
	VTE Precautions N/A <input checked="" type="checkbox"/> Yes (SCD Anticoag)	
	Pt. Specific Concerns: <u>S/P left TBR, protect L knee</u>	

Questions?
