

Check this template against your local regulations and your own policies before you use it.

Business _____ Location _____ Date _____

Each surgical patient For every patient, read aloud at each pause

TASK	NOTES	INITIALS
Admission		
☐ Confirm the patient's identity with the owner, and fit an ID band or collar		
☐ Confirm the procedure, and the side or site, with the owner		
☐ Check the consent form and the estimate are signed, with a contact number for the day		
☐ Confirm when the patient last ate and drank, and any medication given at home		
Before induction		
☐ Confirm the patient's identity, procedure and site against the consent form		
☐ Weigh the patient, and record the weight used for drug doses		
☐ Check the pre-anesthetic exam and any blood results are reviewed		
☐ Check the drug doses are calculated, drawn up and labeled		
☐ Check the anesthetic machine, breathing system, oxygen and scavenging		
☐ Check the IV catheter, fluids, and the monitoring equipment are ready		
☐ Check the emergency drugs and doses for this patient are to hand		
Before the first incision (time out)		
☐ The whole team confirms the patient, procedure and site aloud		
☐ Confirm the surgical site is clipped and prepared, and marked if needed		
☐ Confirm the instruments are sterile and their indicators have changed		
☐ Confirm any antibiotics or pain relief due before surgery have been given		
☐ Agree any concerns, and who calls for help if needed		
Before the patient leaves theatre		
☐ Count swabs, needles and instruments, and confirm the counts match		
☐ Record the procedure, drugs given and any problems in the record		
☐ Agree the recovery plan, pain relief and who monitors recovery		
Recovery and discharge		
☐ Monitor the patient until it's extubated, warm and able to hold its head up		
☐ Call the owner with an update and agree the discharge time		
☐ Go through the discharge instructions and medication with the owner		

Completed by _____ Checked by (manager) _____ Date _____ Notes _____