



Date & Time:

Patient Name:

Ward/Unit:

 **Quality Improvement Secretariat**
Ministry of Health & Family Welfare
www.qis.gov.bd

Name of Operation:

Surgeon:

Anesthesiologist:

Safe Surgery Checklist

Sign In

Time Out

Sign Out

Before induction of anesthesia (with at least Nurse and Anesthesiologist)

Has the patient confirmed his / her

- Identity
- Site
- Procedure
- Consent

Yes

Is the site marked?

Yes

Not applicable

Is the anesthesia machine and medication check complete?

Yes

Does the patient have a:
Known allergy?

No

Yes

Difficult airway or aspiration risk?

No

Yes, and equipment / assistance available

Risk of >500ml blood loss (7ml/kg in children)?

No

Yes, and two IVs/central access and fluids planned

Before skin incision (with Nurse, Anesthesiologist and Surgeon)

Confirm all team members have introduced themselves by name and role.

Confirm the patient's name, procedure, and where the incision will be made.

Has antibiotic prophylaxis been given within the last 60 minutes?

Yes

Not applicable

Anticipated Critical Events

To Surgeon:

What are the critical or non-routine steps?

How long will the case take?

What is the anticipated blood loss?

To Anesthesiologist:

Are there any patient-specific concerns?

To Nursing Team:

Has sterility (including indicator results) been confirmed?

Are there equipment issues or any concerns?

Is essential imaging displayed?

Yes

Not applicable

Before patient leaves operating room (with Nurse, Anesthesiologist and Surgeon)

Nurse Verbally Confirms:

The name of the problem

Completion of instrument, sponge and needle counts

Specimen labeling (read specimen labels aloud, including patient name)

Whether there are any equipment problems to be addressed

To Surgeon, Anesthesiologist and Nurse:

What are the key concerns for recovery and management of this patient?

Signature & Date:

Name:

Designation:

Signature & Date:

Name:

Designation:

Signature & Date:

Name:

Designation: