


|   |                     |   |
|---|---------------------|---|
|  <p>B.S. Aquino Drive,<br/>Bacolod City,<br/>Negros Occidental,<br/>6100</p> <p>DR. PABLO O. TORRE<br/>MEMORIAL HOSPITAL</p> | Document Code:      | DPOTMH-I-38-P03-S01                           |
|   | Effective Date:     | 09-30-2021                                    |
|   | Document Type:      | Standard Operating Procedure                  |
|   | Page Number:        | 1 of 6  |
|   | Department/Section: | Surgical Complex                              |
|   | Document Title:     | <b>SURGICAL SAFETY CHECKLIST<br/>PROTOCOL</b> |

### **PURPOSE:**

1. To improve patient safety by ensuring all of the surgical team engage in the surgical safety checklist.
2. To reduce avoidable complications.
3. To encourage communication and teamwork.

### **SCOPE:**


Surgical Complex

### **PERSON RESPONSIBLE:**

Surgical Team (Surgeon, Anesthesiologist, Nurses, Technicians and other operating room personnel involved in surgery)

### **GENERAL GUIDELINES:**


1. The Surgical Safety Checklist is a standardized tool for effective team communication which is critical component of safe surgery, efficient teamwork and the prevention of major complications.
2. The Surgical Complex adapted the World Health Organization (WHO) Surgical Safety Checklist with few modification made and approved by the surgical team to suit our Surgical Complex setting.
4. A properly filled surgical safety checklist must be a part of every post-operative patient chart.
5. A patient's info board shall be available in every surgical suite. It must contain valuable information including name of patient, operative site, surgeon's name, anesthesiologist, staff, etc. it shall include pre-operative medicines given

|   |                     |   |
|---|---------------------|---|
|  <p>B.S. Aquino Drive,<br/>Bacolod City,<br/>Negros Occidental,<br/>6100</p> <p>DR. PABLO O. TORRE<br/>MEMORIAL HOSPITAL</p> | Document Code:      | DPOTMH-I-38-P03-S01                           |
|   | Effective Date:     | 09-30-2021                                    |
|   | Document Type:      | Standard Operating Procedure                  |
|   | Page Number:        | 2 of 6  |
|   | Department/Section: | Surgical Complex                              |
|   | Document Title:     | <b>SURGICAL SAFETY CHECKLIST<br/>PROTOCOL</b> |


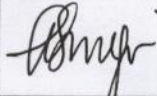

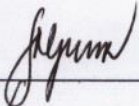
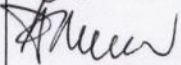
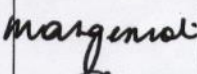

particularly antibiotics including the time it was given. The board must be in a strategic location for all surgical team members to see.

6. The hospital management recognizes the importance of safety check and sensibly integrate these essential steps into the normal operative workflow of the surgical complex.
7. Adherence to surgical safety checklist reinforces accepted safety practices and foster better communication, teamwork between clinical disciplines.
8. Non-compliance of this policy may be a basis for disciplinary actions.




|  |                     |   |
|--|---------------------|---|
|  <p><b>DR. PABLO O. TORRE<br/>MEMORIAL HOSPITAL</b></p> <p>B.S. Aquino Drive,<br/>Bacolod City,<br/>Negros Occidental,<br/>6100</p> | Document Code:      | DPOTMH-I-38-P03-S01                           |
|  | Effective Date:     | 09-30-2021                                    |
|  | Document Type:      | Standard Operating Procedure                  |
|  | Page Number:        | 3 of 6  |
|  | Department/Section: | Surgical Complex                              |
|  | Document Title:     | <b>SURGICAL SAFETY CHECKLIST<br/>PROTOCOL</b> |

**APPROVAL:**

|                           | Name/Title   | Signature   | Date       |
|---------------------------|--|---|------------|
| Prepared by:              | <b>VANESSA V. VERDE, RN</b><br>Surgical Suites Head Nurse                                |    | 09.23.21   |
| Verified:                 | <b>MARIA AGNES A. SARIEGO, RN, MN, FPCHA</b><br>Surgical Complex Manager                 |    | 9-28-2021  |
| Reviewed by:              | <b>DENNIS C. ESCALONA, MN, FPCHA, FPSQua</b><br>Quality Assurance Supervisor             |   | 09-30-2021 |
| Recommending<br>Approval: | <b>MARIA LIZA C. PERAREN, RN, MN</b><br>Nursing Service Division Officer                 |  | 10-08-2021 |
|                           | <b>HENRY F. ALAVAREN, MD, FPSMID, FPSQua</b><br>Total Quality Division Officer           |  | 10/18/2021 |
|                           | <b>MA. ANTONIA S. GENSOLI, MD, FPPS, FPCHA</b><br>Vice President – Chief Medical Officer |  | 10-22-2021 |
| Approved:                 | <b>GENESIS GOLDI D. GOLINGAN</b><br>President and CEO                                    |  | 11/2/2021  |




|   |                     |   |
|---|---------------------|---|
|  <p>B.S. Aquino Drive,<br/>Bacolod City,<br/>Negros Occidental,<br/>6100</p> <p>DR. PABLO O. TORRE<br/>MEMORIAL HOSPITAL</p> | Document Code:      | DPOTMH-I-38-P03-S01                           |
|   | Effective Date:     | 09-30-2021                                    |
|   | Document Type:      | Standard Operating Procedure                  |
|   | Page Number:        | 4 of 6  |
|   | Department/Section: | Surgical Complex                              |
|   | Document Title:     | <b>SURGICAL SAFETY CHECKLIST<br/>PROTOCOL</b> |

## **PROCEDURE:**

### **The three phases of surgical safety checklist:**

- A. **The Sign In** – *to be completed before induction of anesthesia in order to confirm the safety of proceeding. Ideally the surgeon will be present for the **SIGN IN**, as the surgeon may have a clearer idea of anticipated blood loss, allergies or other complications patient factors.*
  1. The Circulator coordinating the checklist will verbally review with the patient (when possible) that his/her identity has been confirmed, that the procedure and site are correct and the consent for surgery has been given.
  2. The Circulator will visually confirm that the operative site has been marked (if appropriate) and will verbally review with the anesthesiologist the patient's risk of blood loss, airway difficulty and allergic reaction and whether a full anesthesia safety check has been completed.
  3. The Circulator confirms that a pulse oximeter has been placed on the patient and is functioning correctly before induction of anesthesia to alert the team to the patient's pulse rate and oxygen saturation.
  
- B. **The Time Out** – *The period after induction and before surgical incision. A momentary pause taken by the team just before skin incision in order to confirm that several essential safety checks are undertaken and involves everyone on the team.*
  1. The Circulator will ask each person in the room to introduce him/herself by name and role. Surgical teams already familiar with each other can confirm out loud that they are performing the correct operation on the correct patient and site.
  2. The surgical team will pause immediately prior to the skin incision to confirm out loud that they are performing the correct operation on the correct patient and site.
  3. To ensure communication of critical patient issues during the **TIME OUT**, the circulator leads a swift discussion among the surgeon, anesthesiologist and nursing staff of critical dangers and operative plans.




|   |                     |   |
|---|---------------------|---|
|  <p>B.S. Aquino Drive,<br/>Bacolod City,<br/>Negros Occidental,<br/>6100</p> <p>DR. PABLO O. TORRE<br/>MEMORIAL HOSPITAL</p> | Document Code:      | DPOTMH-I-38-P03-S01                           |
|   | Effective Date:     | 09-30-2021                                    |
|   | Document Type:      | Standard Operating Procedure                  |
|   | Page Number:        | 5 of 6  |
|   | Department/Section: | Surgical Complex                              |
|   | Document Title:     | <b>SURGICAL SAFETY CHECKLIST<br/>PROTOCOL</b> |

4. The circulator confirms that prophylactic antibiotics have been administered within the previous 60 minutes and that essential imaging is displayed as appropriate.

C. **The Sign Out** – *the period during or immediately after wound closure but before removing the patient from the operating room. This facilitates the transfer of important information to the care teams responsible for the care of the patient after surgery.*


1. The team (Nurse, Surgeon, Anesthesiologist) will review together the operation that was performed, completion of sponge and instruments count and the labeling of any surgical specimens obtained.
2. The team will review any equipment malfunction or issues that need to be addressed.
3. The team will review key plans and concerns regarding postoperative management and recovery before moving the patient from the surgical suites.
4. The Circulator will again confirm the exact time the antibiotic been given intraoperatively.
5. The Circulator will accurately identify the packing, its number or site.

|   |                     |   |
|---|---------------------|---|
|  <p>B.S. Aquino Drive,<br/>Bacolod City,<br/>Negros Occidental,<br/>6100</p> <p>DR. PABLO O. TORRE<br/>MEMORIAL HOSPITAL</p> | Document Code:      | DPOTMH-I-38-P03-S01                           |
|   | Effective Date:     | 09-30-2021                                    |
|   | Document Type:      | Standard Operating Procedure                  |
|   | Page Number:        | 6 of 6  |
|   | Department/Section: | Surgical Complex                              |
|   | Document Title:     | <b>SURGICAL SAFETY CHECKLIST<br/>PROTOCOL</b> |

#### **REFERENCES:**

1. World Health Organization (2008). *Implementation Manual Surgical Safety Checklist (First Edition)*. From [https://www.who.int/patientsafety/safesurgery/tools\\_resources/SSSL\\_Manual\\_finalJun08.pdf](https://www.who.int/patientsafety/safesurgery/tools_resources/SSSL_Manual_finalJun08.pdf)
2. World Health Organization (2021). *Safe Surgery*. From <https://www.who.int/teams/integrated-health-services/patient-safety/research/safe-surgery>
3. World Health Organization (2021). *Patient Safety WHO Surgical Safety Checklist*. From <https://www.who.int/patientsafety/topics/safe-surgery/checklist/en/>
4. American Academy of Orthopaedic Surgeons OrthoInfo (1995-2021). *Surgical Safety Checklist: Steps Your Healthcare Team Takes*. From <https://orthoinfo.aaos.org/en/treatment/surgical-safety-checklist/>



|   |                     |   |
|---|---------------------|---|
|  <p>B.S. Aquino Drive,<br/>Bacolod City,<br/>Negros Occidental,<br/>6100</p> <p>DR. PABLO O. TORRE<br/>MEMORIAL HOSPITAL</p> | Document Code:      | DPOTMH-I-38-P03-S01-WI01                      |
|   | Effective Date:     | 09-30-2021                                    |
|   | Document Type:      | Work Instruction                              |
|   | Page Number:        | 1 of 3  |
|   | Department/Section: | Surgical Complex                              |
|   | Document Title:     | <b>SURGICAL SAFETY CHECKLIST<br/>PROTOCOL</b> |

| KEY TASKS   | PERSON RESPONSIBLE |
|---|--------------------|
| <ol style="list-style-type: none"> <li>1. Verbally reviews with the patient (when possible) that his/her identity has been confirmed, that the procedure and site are correct and the consent for surgery has been given.</li> <li>2. Visually confirms that the operative site has been marked (if appropriate) and will verbally review with the anesthesiologist the patient's risk of blood loss, airway difficulty and allergic reaction and whether a full anesthesia safety check has been completed.</li> <li>3. Confirms that a pulse oximeter has been placed on the patient and is functioning correctly before induction of anesthesia to alert the team to the patient's pulse rate and oxygen saturation.</li> <li>4. Asks each person in the room to introduce him/herself by name and role. Surgical teams already familiar with each other can confirm out loud that they are performing the correct operation on the correct patient and site.</li> <li>5. Confirms that prophylactic antibiotics have been administered within the previous 60 minutes and that essential imaging is displayed as appropriate.</li> <li>6. Confirms again the exact time the antibiotic been given intraoperatively</li> <li>7. Accurately identifies the packing, its number or site</li> </ol> | Circulating Nurse  |
| <ol style="list-style-type: none"> <li>1. Pauses immediately prior to the skin incision to confirm out loud that they are performing the</li> </ol>   | The Surgical Team  |




DR. PABLO O. TORRE  
MEMORIAL HOSPITAL

B.S. Aquino Drive,  
Bacolod City,  
Negros Occidental,  
6100

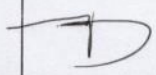
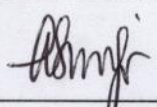

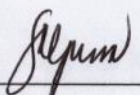
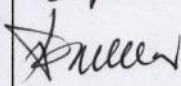
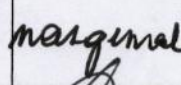
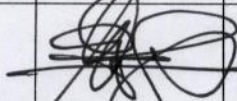
|                     |   |
|---------------------|---|
| Document Code:      | DPOTMH-I-38-P03-S01-WI01                      |
| Effective Date:     | 09-30-2021                                    |
| Document Type:      | Work Instruction                              |
| Page Number:        | 2 of 3  |
| Department/Section: | Surgical Complex                              |
| Document Title:     | <b>SURGICAL SAFETY CHECKLIST<br/>PROTOCOL</b> |

|  |  |
|--|--|
| <p>correct operation on the correct</p> <p>8. Ensures communication of critical patient issues during the <b>TIME OUT</b>, the circulator leads a swift discussion among the surgeon, anesthesiologist and nursing staff of critical dangers and operative plans.</p> <p>9. Reviews together the operation that was performed, completion of sponge and instruments count and the labeling of any surgical specimens obtained</p> <p>10. Reviews any equipment malfunction or issues that need to be addressed</p> <p>11. Reviews key plans and concerns regarding postoperative management and recovery before moving the patient from the operating room</p> |  |
|--|--|



|  |                     |   |
|--|---------------------|---|
|  <p><b>DR. PABLO O. TORRE<br/>MEMORIAL HOSPITAL</b></p> <p>B.S. Aquino Drive,<br/>Bacolod City,<br/>Negros Occidental,<br/>6100</p> | Document Code:      | DPOTMH-I-38-P03-S01-WI01                      |
|  | Effective Date:     | 09-30-2021                                    |
|  | Document Type:      | Work Instruction                              |
|  | Page Number:        | 3 of 3  |
|  | Department/Section: | Surgical Complex                              |
|  | Document Title:     | <b>SURGICAL SAFETY CHECKLIST<br/>PROTOCOL</b> |

**APPROVAL:**

|                        | Name/Title   | Signature   | Date       |
|------------------------|--|---|------------|
| Prepared by:           | <b>VANESSA V. VERDE, RN</b><br>Surgical Suites Head Nurse                                |    | 09-24-21   |
| Verified:              | <b>MARIA AGNES A. SARIEGO, RN, MN, FPCHA</b><br>Surgical Complex Manager                 |    | 9-28-2021  |
| Reviewed by:           | <b>DENNIS C. ESCALONA, MN, FPCHA, FPSQua</b><br>Quality Assurance Supervisor             |   | 10-07-2021 |
| Recommending Approval: | <b>MARIA LIZA C. PERAREN, RN, MN</b><br>Nursing Service Division Officer                 |  | 10-08-2021 |
|                        | <b>HENRY F. ALAVAREN, MD, FPSMID, FPSQua</b><br>Total Quality Division Officer           |  | 10/18/2021 |
|                        | <b>MA. ANTONIA S. GENSOLI, MD, FPPS, FPCHA</b><br>Vice President – Chief Medical Officer |  | 10-22-2021 |
| Approved:              | <b>GENESIS GOLDI D. GOLINGAN</b><br>President and CEO                                    |  | 11/25/2021 |



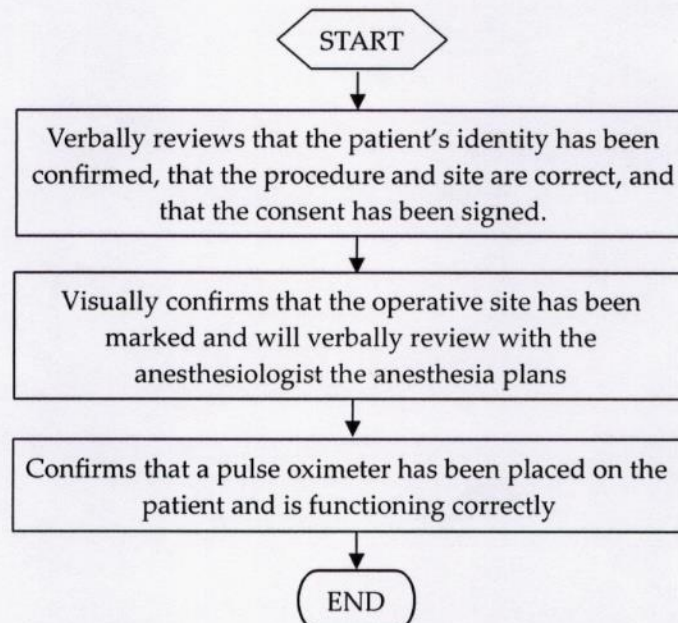
DR. PABLO O. TORRE  
MEMORIAL HOSPITAL

B.S. Aquino Drive,  
Bacolod City,  
Negros Occidental,  
6100

|                     |   |
|---------------------|---|
| Document Code:      | DPOTMH-I-38-P03-S01-FC01                      |
| Effective Date:     | 09-30-2021                                    |
| Document Type:      | Flowchart                                     |
| Page Number:        | 1 of 4  |
| Department/Section: | Surgical Complex                              |
| Document Title:     | <b>SURGICAL SAFETY CHECKLIST<br/>PROTOCOL</b> |

## FLOWCHART

### SIGN-IN





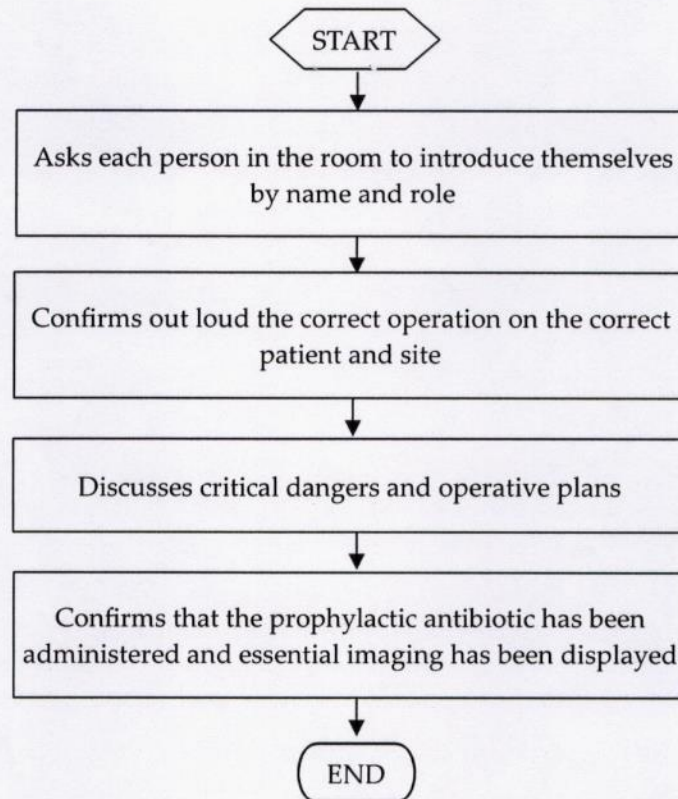


DR. PABLO O. TORRE  
MEMORIAL HOSPITAL

B.S. Aquino Drive,  
Bacolod City,  
Negros Occidental,  
6100

|                     |   |
|---------------------|---|
| Document Code:      | DPOTMH-I-38-P03-S01-FC01                      |
| Effective Date:     | 09-30-2021                                    |
| Document Type:      | Flowchart                                     |
| Page Number:        | 2 of 4  |
| Department/Section: | Surgical Complex                              |
| Document Title:     | <b>SURGICAL SAFETY CHECKLIST<br/>PROTOCOL</b> |

## TIME OUT



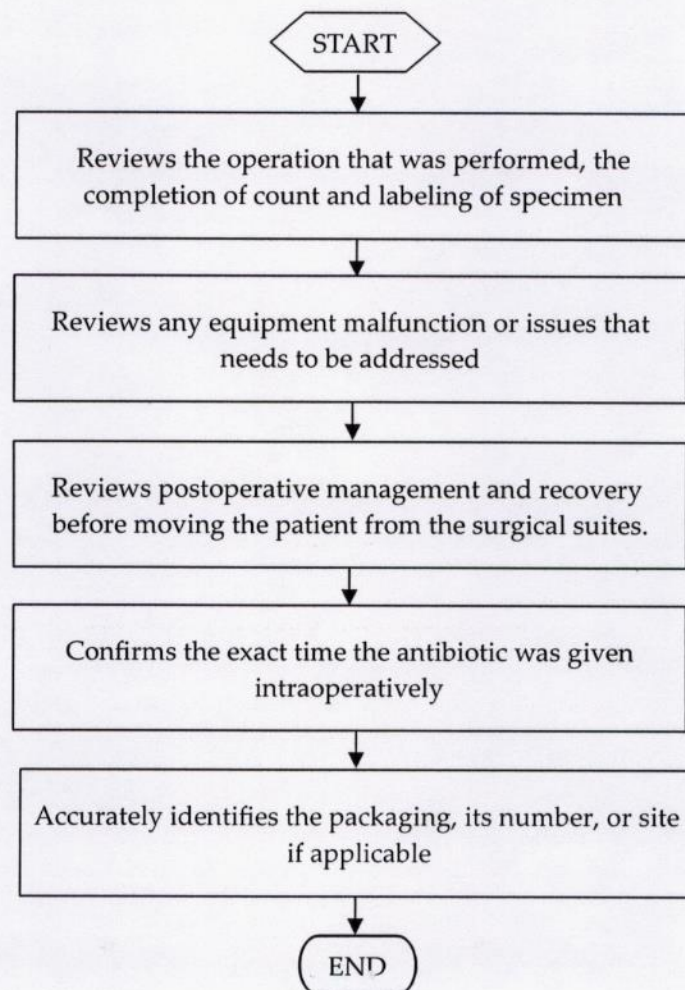


DR. PABLO O. TORRE  
MEMORIAL HOSPITAL


B.S. Aquino Drive,  
Bacolod City,  
Negros Occidental,  
6100

|                     |   |
|---------------------|---|
| Document Code:      | DPOTMH-I-38-P03-S01-FC01                      |
| Effective Date:     | 09-30-2021                                    |
| Document Type:      | Flowchart                                     |
| Page Number:        | 3 of 4  |
| Department/Section: | Surgical Complex                              |
| Document Title:     | <b>SURGICAL SAFETY CHECKLIST<br/>PROTOCOL</b> |


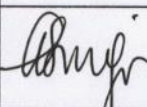

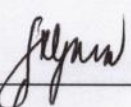
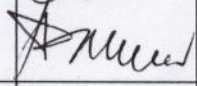
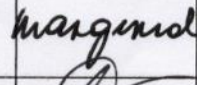

## SIGN OUT





|  |                     |   |
|--|---------------------|---|
|  <p><b>DR. PABLO O. TORRE<br/>MEMORIAL HOSPITAL</b></p> <p>B.S. Aquino Drive,<br/>Bacolod City,<br/>Negros Occidental,<br/>6100</p> | Document Code:      | DPOTMH-I-38-P03-S01-FC01                      |
|  | Effective Date:     | 09-30-2021                                    |
|  | Document Type:      | Flowchart                                     |
|  | Page Number:        | 4 of 4  |
|  | Department/Section: | Surgical Complex                              |
|  | Document Title:     | <b>SURGICAL SAFETY CHECKLIST<br/>PROTOCOL</b> |

**APPROVAL:**

|                        | Name/Title   | Signature   | Date       |
|------------------------|--|---|------------|
| Prepared by:           | <b>VANESSA V. VERDE, RN</b><br>Surgical Suites Head Nurse                                |    | 09.23.21   |
| Verified:              | <b>MARIA AGNES A. SARIOGO, RN, MN, FPCHA</b><br>Surgical Complex Manager                 |    | 9.28.2021  |
| Reviewed by:           | <b>DENNIS C. ESCALONA, MN, FPCHA, FPSQua</b><br>Quality Assurance Supervisor             |    | 10-07-2021 |
| Recommending Approval: | <b>MARIA LIZA C. PERAREN, RN, MN</b><br>Nursing Service Division Officer                 |  | 10-08-2021 |
|                        | <b>HENRY F. ALAVAREN, MD, FPSMID, FPSQua</b><br>Total Quality Division Officer           |  | 10/18/2021 |
|                        | <b>MA. ANTONIA S. GENSOLI, MD, FPPS, FPCHA</b><br>Vice President – Chief Medical Officer |  | 10-22-2021 |
| Approved:              | <b>GENESIS GOLDI D. GOLINGAN</b><br>President and CEO                                    |  | 11/25/2021 |