Pennsylvania Patient Safety Authority expanded advice for the implementation of the Universal Protocol

H. Postoperative Verification

Postoperative Verification (for spinal levels, ribs, and ureters)

Possible modifications of the WHO Surgical Safety Checklist

Possible Integration of Actions to Satisfy Joint Commission Universal Protocol and WHO Surgical Safety Checklist

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<td>Include the correct operation on the schedule.</td>
<td>Verify that all relevant information (history and physical, consent, critical diagnostic test results and images) is available and all documents agree about the correct patient, procedure, and site.</td>
<td>Mark the site, as indicated, before any procedure is performed.</td>
<td>Verify that the patient’s identity and understanding agree with all the other relevant information.</td>
<td>Introduce the team members to each other.</td>
<td>Conduct a time-out immediately before starting any invasive procedure but after reconciling any preceding discrepancies in the information.</td>
<td>Require an intraoperative imaging study.</td>
<td>Verify the specimen label, including the patient’s name, with a read-back.</td>
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<td>Include the correct operation and site on the hospital and physical.</td>
<td>Include the schedule in the relevant information to be verified and reconciled.</td>
<td>Verify the mark with the patient’s understanding.</td>
<td>Mark the site, as indicated, before any procedure is performed.</td>
<td>Get ultimate agreement from all members of the procedure team regarding the patient’s identity, the procedure, and the site during the time-out.</td>
<td>Conduct the time-out according to a standard format (script) with a designated leader.</td>
<td>Get independent verification by the surgeon and a radiologist.</td>
<td>The surgeon should verify the information identifying the specimen, including site, using active communication.</td>
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<td>Include the correct operation and site on the consent.</td>
<td>Include the schedule in the relevant information to be verified and reconciled.</td>
<td>Verify the mark with all the relevant information.</td>
<td>Complete a check of the anesthesia machine and medications.</td>
<td>Confirm if the clineotaxis phalanges was given to the patient within 30 minutes before the incision.</td>
<td>All relevant members of the team doing the procedure should ACTIVELY communicate during the time-out (Joint Commission quote, with Authority emphasis).</td>
<td>Involve all active members of the team doing the procedure in the time-out, including, typically, the surgeon/proceduralist, the anesthesia provider, the circulating nurse, and the surgical technologist.</td>
<td>Clear all patient labels from the OR before the next patient arrives.</td>
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Possible Integration of Actions to Satisfy Joint Commission Universal Protocol and WHO Surgical Safety Checklist

A. Preoperative Preparation

1. Include the correct operation and site on the schedule.
2. Include the correct operation and site on the hospital and physical.
3. Include the schedule in the relevant information to be verified and reconciled.

B. Preoperative Verification

1. Verify that all relevant information (history and physical, consent, critical diagnostic test results and images) is available and all documents agree about the correct patient, procedure, and site.
2. Verify the mark with the patient’s understanding.
3. Verify the mark with all the relevant information.
4. Verify the mark with the patient’s understanding.

C. Site Marking

1. Mark the site, as indicated, before any procedure is performed.
2. Mark the site, as indicated, before any procedure is performed.
3. Confirm if the clineotaxis phalanges was given to the patient within 30 minutes before the incision.
4. Complete a check of the anesthesia machine and medications.

D. Before Anesthesia

1. Verify that the patient’s identity and understanding agree with all the other relevant information.
2. Get ultimate agreement from all members of the procedure team regarding the patient’s identity, the procedure, and the site during the time-out.
3. Confirm if the clineotaxis phalanges was given to the patient within 30 minutes before the incision.

E. Before Incision

1. Include the schedule in the relevant information to be verified and reconciled.
2. Include the schedule in the relevant information to be verified and reconciled.
3. Include the schedule in the relevant information to be verified and reconciled.
4. Include the schedule in the relevant information to be verified and reconciled.

F. Time-Out

1. Introduce the team members to each other. | Conduct a time-out immediately before starting any invasive procedure but after reconciling any preceding discrepancies in the information. | Require an intraoperative imaging study. | Verify the specimen label, including the patient’s name, with a read-back. |
2. Get ultimate agreement from all members of the procedure team regarding the patient’s identity, the procedure, and the site during the time-out. | Conduct the time-out according to a standard format (script) with a designated leader. | Get independent verification by the surgeon and a radiologist. | The surgeon should verify the information identifying the specimen, including site, using active communication. |
3. Confirm if the clineotaxis phalanges was given to the patient within 30 minutes before the incision. | Confirm if the clineotaxis phalanges was given to the patient within 30 minutes before the incision. | Confirm if the clineotaxis phalanges was given to the patient within 30 minutes before the incision. | Confirm if the clineotaxis phalanges was given to the patient within 30 minutes before the incision. |
4. Complete a check of the anesthesia machine and medications. | Complete a check of the anesthesia machine and medications. | Complete a check of the anesthesia machine and medications. | Complete a check of the anesthesia machine and medications. |

G. Intraoperative Verification

1. Include the correct operation and site on the consent. | Include the correct operation and site on the consent. | Include the correct operation and site on the consent. | Include the correct operation and site on the consent. |
2. Include the schedule in the relevant information to be verified and reconciled. | Include the schedule in the relevant information to be verified and reconciled. | Include the schedule in the relevant information to be verified and reconciled. | Include the schedule in the relevant information to be verified and reconciled. |
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H. Postoperative Verification

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