

# Cardiovascular Laboratory Procedures Safety Checklist



**All non-essential activities stopped.**

## Sign-In (prior to induction)

(Registered Nurse or Anesthesia Provider Led)

### Registered Nurse to team:

I have confirmed the following with the patient (state patient name, site, procedure, etc.)

- Patient name
- Procedure to be performed
- Consent for anesthesia and procedure

### Anesthesia or sedation provider with the team:

- Safety check has been completed
- Review of patient allergies
- ASA and Mallampati assessed
- Anticipated airway or aspiration difficulty
- Required equipment/assistance available

### Registered Nurse with the team:

- Has sterility been confirmed, including indicator results ?
- Is there a need for blood products? (anticipated loss > 500 ml or 7 ml/kg in children)
- Is essential imaging available and accessible?
- Implants, medications and solutions are available

**SIGN-IN CHECKLIST COMPLETE**

## Time-Out (prior to incision)

(Proceduralist Led)

### Proceduralist to team:

- Attention! We need to do a Time-Out
- Introduce ourselves and our roles
- This is [full patient name]
- We are doing [procedure/site/laterality} as stated on the consent.
- I have confirmed that the site marking is visible.
- Review of patient allergies if indicated.

### Registered Nurse to the Proceduralist:

- How long will the case take?
- What is the anticipated blood loss?
- Are there any critical steps?

### Registered Nurse to the team:

- Confirms all medications are properly labeled and on the field.
- Confirms sterility of instruments and supplies
- Are there any equipment issues or concerns?
- Fire risk assessment completed

### Proceduralist to the team:

- Have all concerns been addressed?
- Does everyone agree we are ready to go?

**TIME-OUT CHECKLIST COMPLETE**

## Sign-Out (prior to departure)

(Registered Nurse Led)

### Proceduralist to the team:

- We performed a [procedure].

### Registered Nurse to the team:

- Wound classification?
- I have [#] specimens and have labeled them as [patient name, specimen, etc.].
- Are there special instructions for the pathologist?
- We have verified that the counts are correct.
- Are there any equipment issues to be addressed?
- What are the key concerns for recovery and management of this patient?
- Is there anything we could have done better?

**SIGN-OUT CHECKLIST COMPLETE**

Based on the WHO Surgical Safety Checklist developed by:

