

# Cardiovascular Laboratory Procedures Safety Checklist



## Sign-In (prior to proceeding to procedural area)

### Preoperative Nursing Staff

**Confirm patient identity and procedure**  
 I have confirmed the following with the patient (state patient name, site, procedure, etc.) utilizing all relevant documentation, family and visitors, etc.

- Patient name
- Site, including site/side if applicable
- Procedure to be performed
- Consent for surgery or procedure

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**Complete nursing assessment and plan**

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- Have all concerns or issues been addressed?
- Is the patient ready to leave the area?

**SIGN-IN CHECKLIST COMPLETE**

### Anesthesia or Sedation Staff

**Confirm patient identity and procedure**  
 I have confirmed the following with the patient (state patient name, site, procedure, etc.) utilizing all relevant documentation, family and visitors, etc.

- Patient name
- Site, including site/side if applicable
- Procedure to be performed
- Consent for anesthesia

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**Complete anesthesia or sedation assessment and plan**

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- Have all concerns or issues been addressed?
- Is the patient ready to leave the area?

**SIGN-IN CHECKLIST COMPLETE**

### Proceduralist

**Confirm patient identity and procedure**  
 I have confirmed the following with the patient (state patient name, site, procedure, etc.) utilizing all relevant documentation, family and visitors, etc.

- Patient name
- Site, including site/side if applicable
- Procedure to be performed
- Consent for procedure

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**Complete procedural assessment and plan**

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- Have all concerns or issues been addressed?
- Is the patient ready to leave the area?

**SIGN-IN CHECKLIST COMPLETE**

Based on the WHO Surgical Safety Checklist  
 developed by:  World Health Organization