

# Cardiovascular Laboratory Procedures Safety Checklist



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

### Preoperative Nursing Staff

<p><b>Confirm patient identity and procedure</b> I have confirmed the following with the patient (state patient name, site, procedure, etc.) utilizing all relevant documentation, family and visitors, etc.</p> <ul style="list-style-type: none"><li><input type="checkbox"/> Patient name</li><li><input type="checkbox"/> Site, including site/side if applicable</li><li><input type="checkbox"/> Procedure to be performed</li><li><input type="checkbox"/> Consent for surgery or procedure</li></ul>
<p><b>Complete nursing assessment and plan</b></p>
<ul style="list-style-type: none"><li><input type="checkbox"/> Have all concerns or issues been addressed?</li><li><input type="checkbox"/> Is the patient ready to leave the area?</li></ul> <p><b>SIGN-IN CHECKLIST COMPLETE</b></p>

### Anesthesia or Sedation Staff

<p><b>Confirm patient identity and procedure</b> I have confirmed the following with the patient (state patient name, site, procedure, etc.) utilizing all relevant documentation, family and visitors, etc.</p> <ul style="list-style-type: none"><li><input type="checkbox"/> Patient name</li><li><input type="checkbox"/> Site, including site/side if applicable</li><li><input type="checkbox"/> Procedure to be performed</li><li><input type="checkbox"/> Consent for anesthesia</li></ul>
<p><b>Complete anesthesia or sedation assessment and plan</b></p>
<ul style="list-style-type: none"><li><input type="checkbox"/> Have all concerns or issues been addressed?</li><li><input type="checkbox"/> Is the patient ready to leave the area?</li></ul> <p><b>SIGN-IN CHECKLIST COMPLETE</b></p>

### Proceduralist

<p><b>Confirm patient identity and procedure</b> I have confirmed the following with the patient (state patient name, site, procedure, etc.) utilizing all relevant documentation, family and visitors, etc.</p> <ul style="list-style-type: none"><li><input type="checkbox"/> Patient name</li><li><input type="checkbox"/> Site, including site/side if applicable</li><li><input type="checkbox"/> Procedure to be performed</li><li><input type="checkbox"/> Consent for procedure</li></ul>
<p><b>Complete procedural assessment and plan</b></p>
<ul style="list-style-type: none"><li><input type="checkbox"/> Have all concerns or issues been addressed?</li><li><input type="checkbox"/> Is the patient ready to leave the area?</li></ul> <p><b>SIGN-IN CHECKLIST COMPLETE</b></p>

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