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| **Ophthalmology WHO Team Safety Brief (Whole Theatre Team and Ward Staff Nurse)** Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ AM/PM

|  |  |
| --- | --- |
| Introductions by name and role | □ |
| Discuss each patient in turn |
| Patient name | High risk(Senior scrub to do) | Trainee to operate | Specific additional equipment | Nursing concerns | Anesthetic concerns and ASA (where appropriate) |
|  | □ | □ |  |  |  |
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| List order confirmed | □ |
| **Scrub team leader** |
| On Duty Anesthetist: Ext: |  |
| Any staffing concerns | □ |
| Any equipment concerns | □ |
| The complication drawer has been checked | □ |

Ophthalmology WHO Team Safety De-Brief (Whole Theatre Team)

|  |  |  |  |
| --- | --- | --- | --- |
| What went well today?  | Specify: | Any things to improve upon? |  Specify: |
| Y/ N | Y/ N |
| Problems with Scheduling, Patient preparation, Equipment, Implants, Staffing, Anesthetic or Surgical procedure | Y / N |
| Specify: |
| Patient safety incidents | Y / N |
| Specify and indicate who completed Datix: Datix ID Number: |  |

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