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| **WHO Surgical Safety Checklist** **(LocSSIP)** Adapted for Plastics Minor Ops lists

|  |  |
| --- | --- |
| Date and Time: | Patient Label |
| **Sign In** | **Sign Out** |
| Complete before induction of anaesthesia | Complete post procedure |
| □ Introduce team by Name and role.□ Confirm Details:  Name and Date of birth Procedure and site□ Consented.Does the patient…..□….have any significant medical problems? Y N□….take any anticoagulants? Y N□….have any allergies? Y N□….have a cardiac implant/device? Y N□…. Does the patient have appropriate transport home? Y N | □ Procedure notes written.□ Theatre ledger complete. □ Instrument and sharps count complete.□ Sharps disposed of correctly.□ Specimens labelled and histology form completed.□ Follow up care information given.□ GP letter written.□ Were there any equipment problems to be addressed? Y NIf yes,………………………………………………………………………………………□ Outcome form completed. |
| Name:Signature: | Name:Signature: |
| Surgeon: Nurse: HCSW: |

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