

For Surgeons' Offices: What You Can Do to Prevent Wrong-Site Surgery

- When scheduling an operation, include the correct patient name and procedure. Include the side or site if pertinent. Do not use abbreviations. Write out all numbers.
- When obtaining the consent, include the correct procedure. Include the side or site if pertinent. Do not use abbreviations. Write out all numbers. Make sure the patient has signed the consent before the patient next presents to the surgical facility.
- The history and physical should give the preoperative diagnosis, including the side or site if pertinent. It should also state the planned procedure, including the side or site if pertinent, without abbreviations. Pertinent supporting information uniquely found in the office records should be included in the history and physical or copies should be attached.
- If relevant, laboratory results, imaging studies, and/or pathology results should be included in the preoperative documentation.
- When information leaves the surgeon's office, check to make sure the name of the procedure on the scheduling slip, consent, and history and physical all match. All discrepancies should be reconciled as soon as possible.

For more information, visit http://www.patientsafetyauthority.org.

This checklist accompanies

Quarterly update on preventing wrong-site surgery.
Pa Patient Saf Advis [online] 2012 Mar [cited 2012 Mar 1].
Available from Internet: http://patientsafetyauthority.org/
ADVISORIES/AdvisoryLibrary/2012/mar9(1)/Pages/28.aspx.



Surgeon's Office Checklist to Prevent Wrong-Site Surgery

	At Scheduling	Before Preadmission Testing	Before Preoperative Admission
Schedule			
Consent*			
History and Physical*			
including copied office notes†			
Laboratory results†			
Imaging studies†			
Pathology reports†			
All checked documents reconciled			

^{*} Includes patient's legal name, full procedure written out, side or site if pertinent

[†] Include if relevant