From: UCSF-GME
Subject: PATIENT SAFETY AND QUALITY BULLETIN -- Universal Protocol Changes
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Patient Safety and Quality Bulletin

Complying with the Standards

August 7, 2009 Issue No. 38

From the UCSF Chief Medical and Chief Nursing Officers

Universal Protocol

New Requirements for Pre-Procedure Verification, Site Marking and Timeout

To prevent wrong patient and wrong site surgeries and procedures, the Universal Protocol (UP) establishes a standardized process for pre-procedure verification, site marking and "timeout." The following highlights recent changes to the Universal Protocol, Preoperative and Pre-Procedure Verification policy (1).

Highlights of Changes

- **Who Marks the Site**: The site is marked by a person who has privileges or is permitted by the hospital to perform the intended procedure -- the proceduralist. This person will be involved directly in the procedure and will be present at the time the procedure is performed.

- **Pink Armband**: Pink armbands are used as an alternative marking process for patients who refuse site marking or who cannot easily be marked.

- **Checklist**: A paper Universal Protocol Verification Form (#602-820) or the Operating Room PICIS electronic checklist must now be used for both the pre-procedure verification and the timeout. The pre-procedure verification checklist now includes a check of required blood products. See the Pre-Procedure Verification checklist in the attachment.

§ **Who Is Involved in a Timeout**: The immediate members of the

Patient Safety and Quality Bulletin

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Complying with the Standards

UCSF Medical Center UCSF Children's Hospital

DATE 08/03/2009 Issue #38

From the Office of the CMO and CNO

Universal Protocol: New Requirements for Pre-Procedure Verification, Site Marking & "Time-Out."

In an effort to prevent wrong patient and wrong site surgeries/procedures, the Universal Protocol (UP) establishes a standardized process for pre-procedure verification, site marking and "time-out". The following highlights recent changes to the Universal Protocol, Preoperative/Pre-Procedure Verification policy[1].

Highlights of Changes:

- **Who marks the site**: The site is marked by a person who has privileges or is permitted by the hospital to perform the intended procedure: the proceduralist. This person will be involved directly in the procedure and will be present at the time the procedure is performed.
- **Pink Armband:** Pink armbands are to be used as an alternative marking process for patients who refuse site marking, or who cannot easily be marked.
- **Checklist:** A paper Universal Protocol Verification Form (#602-820) or the Operating Room PICIS electronic checklist must now be used for both the pre-procedure verification and the timeout. The pre-procedure verification checklist now includes a check of required blood products.

Pre-Procedure Verification Checklist
Performed in holding area, if any; otherwise performed in procedure room.

STOP Patient may not leave pre-procedure area until this checklist is complete.

Yes	N/A	Checklist filled out by any team member (☑ Check appropriate box)
☐		1. **Verify patient identity.** Patient name and medical record number are identifiers used for inpatients. Patient name and date of birth, or patient name and medical record number, are identifiers used for outpatients. Patient should be actively involved. If an adult patient is not able to verify identity or procedure, a responsible accompanying person can perform verification. A parent, guardian, or provider or nurse who knows the patient, will verify the identity and procedure for pediatric patients.
☐		2. **Verify procedure and site.**
☐	☐	3. **History and physical completed within last 30 days.**
☐	☐	4. **Interval update of H&P if more than 24 hours old.**
☐		5. **Consent(s) signed, dated, witnessed.**
☐	☐	6. **Results of laboratory pathology and radiology studies are present and matched to patient**
☐	☐	7. **Required blood products, implants, devices and equipment are present and functioning.**
☐	☐	8. **Required specimens for blood bank obtained and sent.**

- **Who is involved in a Timeout:** the immediate members of the procedure team, including the proceduralist (in the OR this is the attending surgeon), the anesthesia providers, the circulating nurse and the OR technicians, and other active participants as appropriate for the procedure; and who will be participating in the procedure at its inception.
- **When is a Timeout performed:** before the start of the procedure, and ideally before induction of anesthesia.
- **Timeout is required** for each procedure when two or more procedures are being performed on the same patient (e.g., when two consents are required).
- **New elements in the final timeout checklist include:** verification of prophylactic antibiotics & irrigation fluids and safety precautions based on patient history or meds.

Final Verification Timeout Checklist - Led by Proceduralist

- Other activities suspended.
- Any team member may express concerns.
- Interaction must include all team members.
- Procedure not started until all concerns are resolved.

STOP Except in emergencies, no procedure can begin until both checklists (above and below) have been filled out and signed.

Yes	N/A	Checklist may be filled out by any team member (√ Check appropriate box)
☐		1. Verify patient identity.
☐		2. Verify procedure.
☐		3. Verify consent(s).
☐	☐	4. Verify surgical site and side.
☐	☐	5. Verify site marking.
☐	☐	6. Verify correct patient position.
☐	☐	7. Verify that images and other results are correctly labeled and displayed.
☐	☐	8. Verify that prophylactic antibiotics have been given.
☐	☐	9. Verify that correct irrigation fluids are present.
☐		10. Review safety precautions based on patient history or medications.

For questions regarding UP, contact: John Kulli, MD, Medical Director, Perioperative Services, John.Kulli@ucsfmedctr.org

1. Universal Protocol, Preoperative/Pre-Procedure Verification Policy 6.04.15
http://manuals.ucsfmedicalcenter.org/AdminManual/IndividualPolicies/PreopPreprocedureVerification.pdf

procedure team, including the proceduralist (in the OR this is the attending surgeon), anesthesia providers, circulating nurse and OR technicians, and other active participants as appropriate for the procedure; and those who are participating in the procedure at its inception.

§ **When is a Timeout Performed**: Before the start of the procedure and ideally before induction of anesthesia.

§ **When is Timeout Required**: Timeout is required for each procedure when two or more procedures are being performed on the same patient (e.g., when two consents are required).

§ **Changes in Verification Timeout Checklist**: New elements in the final timeout checklist include verification of prophylactic antibiotics and irrigation fluids and safety precautions based on patient history or medications. See the Final Verification Timeout Checklist in the attachment.

If you have any questions regarding universal protocol, contact John Kulli, M.D., medical director of Perioperative Services, at john.kulli@ucsfmedctr.org

1. Universal Protocol, Preoperative/Pre-Procedure Verification Policy 6.04.15 http://manuals.ucsfmedicalcenter.org/AdminManual/IndividualPolicies/PreopPreprocedureVerification.pdf