

General checklist prior to surgery

General Checklist prior to surgery						
Name	Breed					
Weight	Surgery					
Presurgical checklist – to be done 24-48 hours prior to surgery						
Presurgical checklist						
Name		Date				
Procedure						
Pet examined 24-48 hours prior to surgery?	Skin/gastrointestinal ok?					
Owner aware of estimate?						
Marcain in stock?						
Zinacef/Augmenting in stock?						
Theatre/nurses/xrays available?						
Surgeon contacted and aware of procedure?						
Blood analysis?						
Cerenia tablet for the night before surgery?						
Theatre checklist – to be done the day of the surgery						
Theatre clean? NO dirty ops before surgery?						
Trolley available?						
Dental procedures policy?						
Cerenia given?						



Surgical checklist - to be done on the day of the surgery

SIGN IN		TIME OUT			SIGN OUT			
Has the patient had their	YES	Confirm the patient's name and procedure						
Identity confirmed	YES	Should antibiotcs be given every 90 minutes		ven every	Culture or histopathology samples taken			
Consent checked	YES	YES	NO					
Procedure verified	YES	Does the surgeon anticipates significant blood loss		ipates	Swab count performed			
Surgical site verified	YES	YES	NO					
Has the anaesthetic circuit been checked	YES	Are there any critical steps		teps	Sharps been dealt with			
		YES	NO					
Does the patient have		Are there any specific equipment or repositioning		equipment	Equipment issues noticed or needing sorting			
		YES	NO		O .			
1. Known allergies		Has a swab count been performed?			Any concerns for recovery			
YES	NO	YES	NO					
2. Difficult airway		Are there any anaesthesia specific requirements		sia				
YES	NO	YES	NO					
3. Risk of significant blood loss Has the circuit been checked								
YES	NO	YES	NO					
Are antibiotics needed 30 min before induction Has sterility been confirmed								
YES	NO	YES	NO					
Should NSAIDs be given		e any equipme	nt issues					
YES	NO	YES	NO					
Is the position in theatre l	known							



Discharge checklist - to be done before sending patient home

Discharge checklist	
Name	Date
Procedure	
Postoperative sheets printed	
Surgeon updated owner	
Buster collar	
Painkillers@correct dose	
IV line out	
Pet is clean	
Postoperative plan done and follow ups and X-rays been booked	

Please also check our website for more information.

