

Did you know that the Joint Commission for Accreditation of Healthcare Organizations requires compliance with a Universal Protocol for surgery patients? The following are protocols your healthcare professional should be following.

To confirm that the required Universal Protocol was appropriately used, please use the following checklist:

Several times during your stay at the hospital someone confirmed your identity, the procedure to be performed and the surgical site:

- ✓ At the time the procedure was scheduled.
- ✓ At the time of preadmission testing and assessment.
- ✓ At the time of admission or entry into the hospital.
- ✓ Before leaving the pre-procedure area or entering the procedure room.
- ✓ When care was transferred to another care team member.
- ✓ When you were awake and aware, if possible.

In the pre-procedure area, immediately prior to the procedure, the following information was reviewed:

- ✓ Documentation (e.g. patient history, physical information, nursing assessment, and pre-anesthesia assessment).
- ✓ The completed, and signed, procedure consent form.
- ✓ Applicable diagnostic and radiology test results.
- ✓ A list of any special products or equipment to be used in the procedure.

Marking the surgical site was performed in the following way:

- ✓ The site was marked before you were moved to the location where the procedure was performed and when you were awake and aware, if possible.
- ✓ The site was marked by a licensed provider who was present at the time of the procedure.
- ✓ The mark was unmistakable and made near the site.
- ✓ The mark included the surgeon's initials.
- ✓ The mark was sufficiently permanent to remain visible throughout.
- ✓ For spinal procedures, special radiographic techniques were used for marking the exact vertebra.
- ✓ An alternative process was used if the site could not easily be marked.

The time out conducted prior to the surgery:

- ✓ Was conducted just prior to starting the procedure and prior to starting the anesthesia process.
- ✓ Was a formal process involving verbal communication between all team members.
- ✓ Was performed after all other activities are suspended (to the extent possible).
- ✓ Was performed each time a new procedure was started (if more than one).
- ✓ Confirmed that: 1) you were the right patient and the site was marked, 2) there was agreed, signed, procedure consent form, 3) relevant images and results were used, 4) antibiotics or fluids as needed, and 5) safety precautions based on your patient history or medication use was reviewed.

Please record any comments or suggestions on the back of this brochure and drop in the comment box, thanks!



Pre-op Verification

This **verification** confirms that all relevant documents, related information and equipment are:

- Available prior to the start of the procedure.
- Correctly identified, labeled, and matched to the patient.
- Reviewed and are consistent with the patient's expectations and with the team's understanding of the procedure.

Missing information or discrepancies are addressed before starting the procedure.



Marking the Site

Marking the procedure site allows staff to identify, without mistake, the intended site for the procedure.



Time Out

A **time-out** just before the procedure begins allows the procedural team to conduct one final assessment. The procedure is not started until all questions or concerns are resolved.

The **Joint Commission for Accreditation of Healthcare Organizations** is an independent, not-for-profit organization. The Joint Commission accredits and certifies more than 15,000 health care organizations and programs in the United States. Joint Commission accreditation and certification is recognized nationwide as a commitment to meeting certain performance standards. Starting in 2001 the Joint Commission implemented a set of patient safety standards and goals. The Universal Protocol is one of those standards.

