

Guidelines for Implementing the Universal Protocol for Preventing Wrong Site, Wrong Procedure and Wrong Person Surgery™

These guidelines provide detailed implementation requirements, exemptions and adaptations for special situations.

❑ **Pre-operative verification process**

Verification of the correct person, procedure, and site should occur (as applicable):

- At the time the surgery/procedure is scheduled.
- At the time of admission or entry into the facility.
- Anytime the responsibility for care of the patient is transferred to another caregiver.
- With the patient involved, awake and aware, if possible.
- Before the patient leaves the preoperative area or enters the procedure/surgical room.

A preoperative verification checklist may be helpful to ensure availability and review of the following, prior to the start of the procedure:

- Relevant documentation (e.g., H&P, consent).
- Relevant images, properly labeled and displayed.
- Any required implants and special equipment.

❑ **Marking the operative site**

- Make the mark at or near the incision site. Do NOT mark any non-operative site(s) unless necessary for some other aspect of care.
- The mark must be unambiguous (e.g., use initials or “YES” or a line representing the proposed incision; consider that “X” may be ambiguous).
- The mark must be positioned to be visible after the patient is prepped and draped.
- The mark must be made using a marker that is sufficiently permanent to remain visible after completion of the skin prep. Adhesive site markers should not be used as the sole means of marking the site.
- The method of marking and type of mark should be consistent throughout the organization.
- At a minimum, mark all cases involving laterality, multiple structures (fingers, toes, lesions), or multiple levels (spine). Note: In addition to pre-operative skin marking of the general spinal region, special intraoperative radiographic techniques are used for marking the exact vertebral level).
- The person performing the procedure should do the site marking.
- Marking must take place with the patient involved, awake and aware, if possible.
- Final verification of the site mark must take place during the “time out.”
- A defined procedure must be in place for patients who refuse site marking.

▪ **Exemptions:**

- Single organ cases (e.g., Cesarean section, cardiac surgery).
- Interventional cases for which the catheter/instrument insertion site is not predetermined (e.g., cardiac catheterization).
- Teeth—BUT, indicate operative tooth name(s) on documentation *OR* mark the operative tooth (teeth) on the dental radiographs or dental diagram.
- Premature infants, for whom the mark may cause a permanent tattoo.

❑ **“Time out” immediately before starting the procedure**

Must be conducted in the location where the procedure will be done, just before starting the procedure. It must involve the entire operative team, use active communication, be briefly documented, such as in a checklist (the organization should determine the type and amount of documentation) and must, at the least, include:

- Correct patient identity.
- Correct side and site.
- Agreement on the procedure to be done.
- Correct patient position.
- Availability of correct implants and any special equipment or special requirements.

The organization should have processes and systems in place for reconciling differences in staff responses during the “time out.”

❑ **Procedures for non-OR settings including bedside procedures.**

- Site marking must be done for any procedure that involves laterality, multiple structures or levels (even if the procedure takes place outside of an OR).
- Verification, site marking, and “time out” procedures should be as consistent as possible throughout the organization, including the OR and other locations where invasive procedures are done.
- Exception: Cases in which the individual doing the procedure is in continuous attendance with the patient from the time of decision to do the procedure and consent from the patient through to the conduct of the procedure may be exempted from the site marking requirement. The requirement for a “time out” final verification still applies.