

SOP Template: Patient Identification and Surgical Site Confirmation Protocol

This SOP details the **patient identification and surgical site confirmation protocol**, encompassing steps for verifying patient identity, confirming the correct surgical site and procedure, utilizing standardized checklists and time-out procedures, and communicating effectively among surgical team members. The objective is to prevent wrong-patient, wrong-site, and wrong-procedure surgeries, ensuring patient safety and compliance with healthcare regulations.

1. Purpose

To establish a standardized process for accurate patient identification, correct surgical site and procedure confirmation, and effective team communication, minimizing the risk of surgical errors.

2. Scope

This protocol applies to all surgical procedures performed in the healthcare facility and must be followed by all members of the surgical team.

3. Responsibilities

- All surgical team members are responsible for adhering to this protocol.
- The circulating nurse ensures checklist completion and proper documentation.
- The surgeon leads the site confirmation and time-out procedures.
- Anesthesiologists and other staff participate in verification steps and time-out.

4. Procedure

1. Patient Identification

- a. Verify patient identity using at least two identifiers (e.g., full name and date of birth), as per facility policy.
- b. Compare information with the consent form, patient record, and identification wristband.
- c. Address any discrepancies prior to proceeding.

2. Surgical Site and Procedure Confirmation

- a. Confirm surgical site, side, and procedure with the patient (if possible) and family.
- b. Verify with the informed consent, operative schedule, and pre-operative documentation.
- c. Mark the surgical site with an indelible marker by the surgeon (or designated clinician)
 - Markings should be visible after prepping and draping.
 - Non-operative sites must NOT be marked.

3. Time-Out Procedure

- a. Conduct a standardized time-out immediately before incision, involving the entire surgical team.
- b. The time-out leader (usually the surgeon) states: patient name, surgical procedure, site, and side.
- c. All team members must verbally confirm agreement or voice concerns.
- d. Any discrepancies must be addressed before proceeding.

4. Checklist Utilization

- a. Use a standardized surgical safety checklist (e.g., WHO Surgical Safety Checklist) throughout the process.
- b. The circulating nurse documents completion and any corrective actions taken.

5. Effective Communication

- a. Foster a culture where all team members can speak up about concerns or uncertainties.
- b. Confirm mutual understanding at each verification step.

5. Documentation

- Record all identification and confirmation steps in the patient chart.
- Document the results of the time-out, marking, and any discrepancies identified and resolved.

6. Compliance and Auditing

- Routine audits to ensure protocol adherence.
- Review and update the protocol regularly as per regulatory requirements or identified deficiencies.

7. References

- World Health Organization. Surgical Safety Checklist.
- The Joint Commission Universal Protocol.
- Facility-specific policies and procedures.

8. Revision History

Version	Date	Author	Description
1.0	2024-06-30	Compliance Department	Initial Release