Standard Operating Procedure (SOP): Patient Identification and Confirmation of Surgical Procedure

This SOP describes the processes for **patient identification and confirmation of surgical procedure**, including verifying patient identity through multiple identifiers, confirming the surgical site and procedure, involving the surgical team in preoperative verification, and utilizing checklists to prevent wrong-site, wrong-procedure, and wrong-patient surgeries. The purpose is to enhance patient safety and ensure accurate surgical care delivery through standardized verification practices prior to anesthesia and incision.

1. Purpose

To enhance patient safety and ensure accurate surgical care delivery through standardized verification practices prior to administration of anesthesia and surgical incision.

2. Scope

This SOP applies to all surgical cases performed at [Facility Name], and is relevant to all members of the surgical team, including surgeons, anesthesiologists, nurses, and support staff.

3. Responsibilities

Role	Responsibility
Surgeon	Leads site and procedure verification, confirms with patient and team.
Anesthesia Provider	Participates in verification and ensures documentation is complete.
Nurse	Initiates patient ID check, uses checklists, documents completion.
Surgical Tech/Assistant	Assists in verification and site marking as needed.

4. Procedure

4.1 Patient Identification

- 1. Upon admission to the preoperative area, confirm patient identity using at least **two unique identifiers** (e.g., full name, date of birth, medical record number).
- 2. Ask the patient (or legal guardian) to state their name and date of birth; compare with identification band and medical records.
- 3. If discrepancies are found, resolve before proceeding.

4.2 Confirmation of Surgical Procedure and Site

- 1. Review the patient's consent form and match with the surgical schedule and medical records.
- 2. With the patient (or guardian) present, state the procedure and surgical site; patient/guardian must verbally confirm
- 3. Physician or designated team member marks the surgical site with indelible marker (when applicable; never mark contralateral or non-operative sites).
- 4. Document site marking per facility policy.

4.3 Preoperative Team Verification ("Time-out")

- 1. Prior to induction of anesthesia and incision, the surgical team assembles for a standardized "time-out."
- 2. During time-out, confirm:
 - Correct patient (using identifiers)
 - Correct surgical procedure
 - o Correct surgical site and patient position
 - Availability of required documents, imaging, and implants/devices
- 3. All team members must verbally acknowledge agreement before proceeding.
- 4. Document time-out completion in the patient's record.

4.4 Use of Checklist

- 1. Utilize the facility's standardized surgical safety checklist for all cases.
- 2. Checklists must be completed and documented at each critical step: admission, pre-anesthesia, site marking, time-out.

5. Documentation

- Record all verification steps in the patient's medical record.
- Document discrepancies, resolutions, and completion of checklists.

6. References

- WHO Surgical Safety Checklist
- Facility Policy on Surgical Verification
- Joint Commission Universal Protocol

7. Revision and Review

This SOP shall be reviewed annually and revised as needed to comply with updated safety standards and regulatory requirements.