

JONA Perioperative Safety Checklist 2024

step	Phase0	Phase1	Phase2	Phase3	Phase4
timing	The day before surgery or Before entering the operating room	Before induction of anesthesia	Before surgery	During surgery and before leaving the room	When leaving and after leaving the room
Person to check	Outpatient or Wards, surgeons and ORNs	ORNs and Anesthesiologists	The entire surgical team	The entire surgical team	ORNs and outpatient or ward
Check items	【Patient Identification】 <input type="checkbox"/> Name Date of birth <input type="checkbox"/> consent form <input type="checkbox"/> surgical site/method <input type="checkbox"/> marking <input type="checkbox"/> allergy <input type="checkbox"/> Wear <input type="checkbox"/> Contraindications <input type="checkbox"/> Discontinued medication <input type="checkbox"/> Patches	【Patient Identification】 <input type="checkbox"/> Patient Authentication <input type="checkbox"/> Name Date of birth <input type="checkbox"/> consent form <input type="checkbox"/> surgical site/method <input type="checkbox"/> marking <input type="checkbox"/> allergy <input type="checkbox"/> Discontinued medication <input type="checkbox"/> Patches <input type="checkbox"/> Contraindications <input type="checkbox"/> blood products <input type="checkbox"/> Difficult intubation or risk of aspiration <input type="checkbox"/> Bleeding risk <input type="checkbox"/> Deep vein thrombosis prevention instructions <input type="checkbox"/> Activation of vital signs monitor	<input type="checkbox"/> Team introductions 【Patient Identification】 <input type="checkbox"/> Name Date of birth <input type="checkbox"/> surgical site/method <input type="checkbox"/> marking From the surgeon <input type="checkbox"/> Unusual procedures <input type="checkbox"/> surgery time <input type="checkbox"/> Estimated blood loss From an anesthesiologist <input type="checkbox"/> Patient-specific problems <input type="checkbox"/> Antibiotics From the equipment nurse <input type="checkbox"/> Equipment damage <input type="checkbox"/> Inadequate sterilization	Before closure <input type="checkbox"/> Surgical method confirmation <input type="checkbox"/> Equipment counting <input type="checkbox"/> Equipment damage <input type="checkbox"/> Catheters and drains <input type="checkbox"/> Problems with postoperative management	<input type="checkbox"/> Problems with postoperative management From the surgeon From an anesthesiologist From ORNs
				Before the end 【Specimen confirmation】 <input type="checkbox"/> Inspection order/slip <input type="checkbox"/> Patient name <input type="checkbox"/> Specimen name <input type="checkbox"/> number <input type="checkbox"/> Specimen fixation method	

We recommend that you add to or modify this checklist according to the actual circumstances of your facility.

Modified the WHO (World Health Organization) Surgical Safety Checklist

* ORNs : operating room nurse



日本手術看護学会
Japan periOperative Nursing Academy