

BLAYK, BONZE ANNE ROSE A00088518428 M000597460

05/01/1956 62

Caballes, Freder ICU ICU06-0

Date of Procedure: 9 1918 CMC UNIVERSAL PROTOCOL CHECKLIST - SURGICAL SERVICES Location: Main OR Surgicare OR Pre-operative / Pre-procedural 1947 ☐ Cath Lab Procedural Time-out #2 (if applicable) Pre-Assessment (PAT) Other: Procedure Room Anesthesia Time Out Regional Only Additional Signatures (if applicable) Initials Patent Ready Name Procedural Time-out #1 Correct Patient: Verified by name and date of birth 2. Correct Procedure 3. Correct Site / Side / Level / Digit 4. Correct Informed Consent Correct Anesthesia Consent; Plan confirmed¹ 6. Correct History and Physical / H&P Update Correct Equipment / Requirements 8. Correct Implants DINE well 9. Antibiotic Available / Time Given² List Antibiotic(s) Given __ 10. Correct Irrigation Fluids Available 11. Relevant Images / Diagnostic Studies (Surgeon specified list) 12. Relevant Diagnostic Studies Displayed for Correct 13. Revelant Pathology Reports (Surgeon specified) worl soul 14. Site Marked #1: Lat Mould of Site Marked #2: Site Marked #3: 15. Correct Position 16. Radiologic Review (when germane to the case) 17. Safety Element: Are there any other safety issues or concerns specific to this patient? Regional Participants in Time-outs: (List all team members and titles) Procedural T.O. #1 Procedural T.O. #2 Anesthesia T.O. M. Blake m, Robelt Driver, MEN F. Jaken PCA Bourdo. Time of occurrence: Time out participants verified by (signature*): Discprepancy / Disagreement - Issue: (Use progress notes if more space needed) __ Time: Physician Notified: _____ Date: _____ Resolved (safe to proceed) Resolution: