Surgical Checklist



Pet's name:	. Surname	.Date of surgery
Procedure performed:		
Surgical Site:		

Surgeon's name:....

At Admission						
Confirm owner contact detail	Discuss preoperative blood test	Discuss potential complications				
Discuss previous history	Confirm limb and procedure	Consent form signed				
Check previous doses of current medication	Discuss aftercare	Skin check				
2. Pre induction preparation						
TPR performed	IVFT set up	Active warming prepared				
	IVFT set up Induction agent, ET tube/tie prepared	Active warming prepared GA monitoring equipment including blood pressure monitoring prepared				
TPR performed		GA monitoring equipment including				

3. Peri-Operatively							
	Eyes Lubricated, continue to do this every 30minutes throughout the procedure (if necessary do more often)		Give Zinacef at time of clipping and cleaning please repeat every 90minutes until surgery is complete then check with Surgeon		Give Paracetamol via slow Iv.		
	confirm IVFT at 5ml/kg/hr or approp <mark>riate</mark>						

4	4. Surgical site preparation checklist					
		Clip site confirmed with surgeon		Nerve block performed by surgeon		Chloroprep applied to surgical site
		First scrub with dilute hibiscrub		Second scrub with dilute hibiscrub		

5. Su	5. Surgical Safety Check prior to first incision					
	Patient name	Access to imaging	Confirm first and second scrub and chloroprep			
	Confirm limb and procedure	Give NSAIDS after blood pressure is confirmed at normal range	Confirm kit sterility			

6. Post-operatively Place primapore Clean limb Confirm plan for analgesia with surgeon Remove foot bandage Image: Clean limb Image: Clean limb

7. On Recovery from anaesthetic

Monitor	until fully recovered	Pain score as appropriate	Surgeon telephone call with owner

8. At discharge				
Post operative care sheets given to owner		Medications dispensed and explained to owner		Buster collar fitted
Discharge sheets given to ov	ner	Follow up appointment made for owner		