

WHO Surgical Safety Checklist

FLEXIBLE CYSTOSCOPY ONLY



Royal Cornwall Hospitals
NHS Trust

SIGN IN (To be read out loud by endoscopist)

Before sedation and scope insertion

- Has the team introduced themselves? Yes
- What is the patient's name?
- What procedure is planned and consented for?
- Does the patient have a known allergy? Yes No
- Does the patient have any metalwork? Yes No
- Has the urine dipstick been checked? Yes No
- Has the anticoagulation status been checked? Yes No

Patient Details

Last name:

First name:

Date of birth:

NHS Number:

*If the NHS Number is not immediately available, a temporary number should be used until it is

Print name:

Signature of Registered Practitioner:

Date:

Confirmation that this WHO checklist has been entirely completed

Clinician:
Name:

Signature:

Date:

SIGN OUT (To be read out loud by endoscopist)

End of procedure

- Has the name of the procedure been recorded?
- Have all the pieces of equipment used been accounted for?
- Have the specimens been labelled (with patient's name)?
- Have any equipment problems been identified that need to be addressed?
- Have the instructions for post procedural care including anticoagulation status been agreed?

With effect from October 2018