

Table. Actions Cited by Eight Hospitals Implementing Successful Programs to Reduce the Risk of Wrong-Site Surgery (ordered by number of times cited)

TIMES CITED	ACTIONS
6	<p>Standardize policies and procedures across the facility.</p> <p>Educate all physicians and nursing staff about problems, impact, solutions, and policies and procedures. Use cases, including near misses as motivation for change. Use role models to assist in the process. Use information from the Pennsylvania Patient Safety Authority^a to support evidence-based best practice.</p> <p>Monitor results and compliance regularly, with independent observers, and provide results to all relevant audiences, including the facility's board of directors.</p>
5	<p>Demonstrate leadership commitment and support.</p>
4	<p>Conduct root-cause analyses (RCAs) on all wrong-site events, including important near misses, and involve the physicians in the analyses.</p> <p>Involve operating room (OR) staff, anesthesia providers, and surgeons in the development of consensus around appropriate policies and procedures.</p> <p>Improve the use of a preoperative checklist for documentation verification and reconciliation.</p> <p>Develop a highly scripted time-out that engages all OR team members in the time-out process, and educate personnel about the script.</p> <p>Strictly enforce the agreed-upon policies and procedures, with peer review for repeatedly noncompliant physicians.</p>
3	<p>Share adverse events, near misses, and the results of RCAs with all relevant audiences, including the facility's board of directors.</p> <p>Conduct a detailed review and refinement of the appropriate policies and procedures, using mock tracer methodology, results of RCAs of events, information from the Authority,^a and consensus from members of the OR team.</p> <p>Implement the World Health Organization surgical safety checklist.</p> <p>Establish a policy that at least two people, including a physician and a nurse, participate in the time-out for any invasive procedure, including bedside procedures.</p> <p>Establish a culture in which nurses are empowered to enforce policies and procedures, and can stop physician procedures if necessary for clarification.</p>
2	<p>Make prevention of wrong-site surgery a patient safety priority.</p> <p>Use mock tracer methodology to improve processes.</p> <p>Establish a sense of ownership by all involved in creating and following policies and procedures.</p> <p>Post enlarged time-out scripts in each OR.</p> <p>Follow up with a program for continued improvement of the processes.</p>
1	<p>Establish a surgical patient safety committee.</p> <p>Assign responsibilities for solutions.</p> <p>Make the intermediate objective of perfect compliance with Universal Protocol policies and procedures a goal, rather than making no wrong-site surgery a goal.</p> <p>Implement changes one service at a time.</p> <p>Focus on continuity of care.</p> <p>Identify and eliminate look-alike and sound-alike terms.^b</p> <p>Emphasize the benefit to the patient.</p> <p>Establish a culture of respectful interactions between physicians and nurses.</p> <p>Have a program for explaining to patients the need for redundancy in asking questions.^a</p> <p>Insist on accurate consents.</p> <p>Include anesthetic blocks in the procedures covered by the processes.</p> <p>Start each day in each OR with a daily preview.</p> <p>Do a formal patient identification on entering the OR.</p>

a. Pennsylvania Patient Safety Authority (Authority). Preventing wrong-site surgery [patient safety tool collection online]. [cited 2010 May 3]. Harrisburg (PA): Authority. Available from Internet: <http://www.patientsafetyauthority.org/EducationalTools/PatientSafetyTools/PWSS/Pages/home.aspx>.

b. Potentially dangerous abbreviation in surgery. PA PSRS Patient Saf Advis [online] 2004 Mar [cited 2010 May 3] Available from Internet: [http://www.patientsafetyauthority.org/ADVISORIES/AdvisoryLibrary/2004/Mar1\(1\)/Pages/02a.aspx](http://www.patientsafetyauthority.org/ADVISORIES/AdvisoryLibrary/2004/Mar1(1)/Pages/02a.aspx).