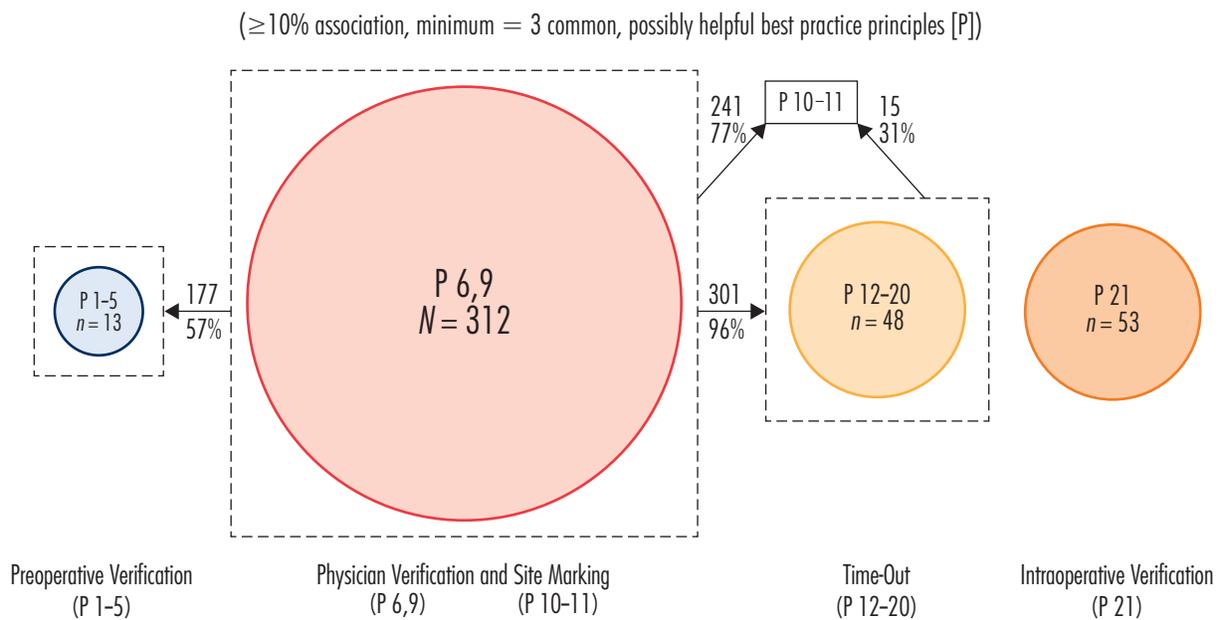


Associations for Key Best Practice Principles in a Potential Impact Analysis of 431 Wrong-Site Procedures



Legend

This diagram represents the relationships between key independent best practice principles on a Universal Protocol timeline. The potential impact of physician verification—with its links to proper preoperative verification, site marking, and time-out—was considered possibly helpful the most often (76% of analyses), suggesting its importance in helping physicians form accurate and persistent mental models of the operative situations before participating in the time-outs. The potential impact of a proper time-out was independently linked to proper preoperative verification and site marking. The potential impact of intraoperative verification, such as localization of vertebral level, was usually totally independent of other best practice principles. Patient identification (P 7-8) was always associated with other best practice principles.

MST1463

For more information, visit <http://www.patientsafetyauthority.org>.

This flowchart accompanies

Clarke JR. Quarterly update: what might be the impact of using evidence-based best practices for preventing wrong-site surgery [online]? Pa Patient Saf Advis 2011 Sep [cited 2011 Sep 1].

Available from Internet: [http://www.patientsafetyauthority.org/ADVISORIES/AdvisoryLibrary/2011/Sep8\(3\)/Pages/109.aspx](http://www.patientsafetyauthority.org/ADVISORIES/AdvisoryLibrary/2011/Sep8(3)/Pages/109.aspx).