

Introduction to Perioperative Theatre Safety

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(Designed as a quick-reference guide for students, new staff, and multidisciplinary teams)

1. Core Concepts

Term	Definition	Why It Matters
Perioperative	The entire timeline surrounding a surgical procedure – pre-op, intra-op, and post-op phases.	Safety hazards can arise at any stage; a “whole-process” view prevents gaps.
Theatre (Operating Room) Safety	A systematic approach that protects patients, staff, and equipment from harm during surgery.	Reduces morbidity, mortality, and costly adverse events.
Safety Culture	Shared values, attitudes, and behaviours that prioritize safety over speed or convenience.	Drives reporting, teamwork, and continuous improvement.

2. The Perioperative Timeline & Key Safety Checks

Phase	Primary Goal	Standard Safety Checks
Preoperative	Verify patient identity, procedure, and readiness.	• Time-Out (patient, procedure, site, side) • Consent review • Allergies & medication reconciliation • Equipment & implant availability • Pre-oxygenation
Induction	Secure airway & maintain physiologic stability.	• Drug dosing double-check • Monitoring set-up (ECG, SpO₂, EtCO₂, NIBP)

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Phase	Primary Goal	Standard Safety Checks
Intraoperative	Perform surgery safely while protecting staff and environment.	• Sterile field integrity • Surgical count (sponges, instruments, needles) • Temperature management • Radiation safety (if applicable) • Extubation criteria
Emergence & Transfer	Ensure safe awakening and handover to recovery.	• Postop analgesia plan • Handover checklist (patient status, fluids, labs, pending actions) • Pain, nausea, vitals trend
Postoperative (PACU/ICU)	Monitor for early complications.	• Wound inspection • Documentation of any intraop events

3. The WHO Surgical Safety Checklist (Adapted)

Checklist Segment	Items to Verify	Typical Owner
Sign In (Before anaesthesia)	• Patient identity • Procedure & site • Allergies • Anticipated blood loss • Required equipment • Confirm patient, procedure, site, side	Surgeon & circulating nurse
Time Out (Before skin incision)	• Prophylactic antibiotics given • Imaging displayed • Critical steps discussed • Specimen labeling	Entire operative team
Sign Out (Before the patient leaves OR)	• Counts correct • Equipment removed • Postop orders confirmed	Surgeon & scrub nurse

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Tip: Use a laminated checklist on a magnetic board; tick each item verbally to reinforce shared responsibility.

4. Human Factors & Teamwork

1. Communication

- Closed-loop: Sender ? Receiver ? Confirmation.
- SBAR (Situation, Background, Assessment, Recommendation) for briefings.

2. Leadership

- The surgeon or lead anaesthetist sets the tone—explicitly invite questions.

3. Situational Awareness

- Continuously scan the environment: patient vitals, instrument status, noise level.

4. Fatigue Management

- Limit