

C³

Correct Patient, Correct Procedure, Correct Site

Marking and Time-Out Procedure

Utah Patient Safety Steering Committee

Sentinel Event Users Group

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Patient Surgery Safety Procedures

Site Markings and Explanations

- **Step 1:** The accountable person (surgeon or procedural person is preferred) performing the procedure should mark the site with the patient prior to pre-operative medication or anesthesia when feasible.
- **Step 2:** Markings should be made with the word "YES". A line or dots for pediatric, facial or cosmetic surgeries may be utilized when necessary. Procedures involving right/left distinction, multiple structures such as fingers and toes, or multiple levels as in spinal procedures should be differentiated by the markings. A surgical skin marker should be used for marking the site and the mark should be visible after the patient is prepped and draped.

Patient Verification

- **Step 3:** Patient and/or person giving consent (if patient is unable due to cognition problems, consciousness, language, readability of the consent form, or understanding) should indicate that correct site has been marked. If patient refuses marking, documentation of the refusal must be secured. If the H&P, surgical consent, patient's view of the site and nurses view of the site do not all agree, the patient is not brought into the operating room. If x-rays are available, the surgeon shall review prior to beginning the procedure.

Time Out

- **Step 4:** The facility will define the accountable person (surgeon or procedural person is preferred) for calling a "time out" prior to actual start of the procedure.
 1. The "time out" includes active (affirmative) participation from the procedure team, including but not limited to support staff, anesthesia, provider and nursing staff.
 2. The "time out" is to occur in the location where the procedure is being performed (operative, procedure or patient room) but **prior** to actual commencement of procedure.
- **Step 5:** The "time out" must include:
 1. **C¹** - Correct patient must be verified with two patient identifiers defined by the facility.
 2. **C²** - Correct procedure (including implants) must be verified with consent form and medical documentation.
 3. **C³** - Correct site (procedures involving right/left distinction, multiple structures such as fingers and toes, or multiple levels) must be verified with consent form and medical documentation.

Exception: The exception to the above marking procedure would be in the case of emergency surgery where the provider is present continuously with the patient from the time of the decision to perform the procedure and until procedure is complete. A "time out" should still occur unless it would add more risk than benefit to the patient.

