



Los Angeles County Department of Health Services

Policy & Procedure Title:		DHS Standardized Non-OR Procedural Time Out Policy	
Category:	300-399 Operation Policy	Policy No.:	321.006
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DHS Division/Unit of Origin:	Risk Management and Patient Safety Program		
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Distribution: DHS-wide	<input checked="" type="checkbox"/>	If not DHS-wide, other distribution:	

PURPOSE:

The purpose of this policy is to ensure safe performance of procedures outside of the operating room which require written informed consent, by utilizing the DHS Standardized Non-OR Procedural Time Out checklist.

The checklist includes core components (using the acronym, ASK NICE) that need to be confirmed and verified prior to the start of the non-OR procedure.

BACKGROUND:

The Joint Commission requires all accredited hospitals and ambulatory care surgical centers to perform a Time Out immediately before starting an invasive procedure or making a skin incision. The purpose of the Time Out is to conduct a final assessment ensuring that the correct patient, site, and procedure are identified. During the Time Out, activities are suspended to the extent possible so that team members can focus on active confirmation of the patient, site, and planned procedure(s).

DEFINITION(S):

OR – operating room (surgical suite)

Non-OR –a patient care area specifically located outside the operating room or surgical suite where a procedure may be performed (e.g., cath lab, interventional radiology, endoscopy, ICU, ER, adult primary care clinic, OB-Gyn/women’s clinic, optometry clinic, dental clinic, etc.)

The mission of the Los Angeles County Department of Health Services is to ensure access to high-quality, patient-centered, cost-effective health care to Los Angeles County residents through direct services at DHS facilities and through collaboration with community and university partners.

Revision/Review Dates:
 Department Head/Designee Approval:

Non-OR Procedure – procedure performed outside of an operating room/surgical suite which requires the written informed consent.

Core Components – using the acronym ASK NICE, these are essential elements in the DHS Non-OR Procedural Time Out Checklist which need to be confirmed and verified prior to the start of every procedure performed outside an operating room/surgical suite.

Operator – a staff (e.g., attending physician, medical trainee, anesthesia provider, PICC/Central Line nurse, advanced practice practitioners, technicians, therapists, etc.) who will perform a non-OR procedure.

Relevant Team Members - members and participants in certain non-OR procedures, as established by facility policy. The team members may include but are not limited to, the operator performing the non-OR procedure, the patient's nurse, workforce member or students assisting the operator, and any other active participants who are/must be present at the start of the non-OR procedure.

POLICY:

When doing procedures requiring written informed consent that are performed outside of an OR/surgical area, workforce members shall utilize the DHS Standardized Non-OR Procedural Time Out Checklist (*Attachment I*).

If possible, the patient should be involved in the process.

In the event that a written informed consent is not obtainable (e.g. life threatening emergency), some or all of the elements may be deferred.

Attestation of the use or partial use of the DHS Standardized Non-OR Procedural Time Out Checklist shall be documented in the patient's medical record in the appropriate fields of ORCHID.

PROCEDURE:

- 1) All operators who perform Non-OR procedures are required to perform a DHS Standardized Non-OR Procedural Time Out prior to the start of the procedure.
- 2) During the DHS Standardized Non-OR Procedural Time Out, activities are suspended to the extent possible so that the operator and other participants (if any) can focus on active confirmation of the patient, site, and planned procedure(s).
- 3) As applicable to the procedure performed and/or per facility policy, all relevant team members of the procedure team must be present before the DHS Standardized Non-OR Procedural Time Out is initiated.

- 4) The operator (and relevant team members, if any) must utilize and actively verify core components of the DHS Standardized Non-OR Procedural Time Out Checklist (*Attachment I*).
- 5) If there are any discrepancies, questions, or concerns during the DHS Standardized Non-OR Procedural Time Out, the process is halted and will not start until the discrepancies, questions, or concerns are resolved.
- 6) Documentation of completion of the DHS Standardized Non-OR Procedural Time Out process will be noted in patient's medical record.

ATTACHMENTS/FORMS:

DHS Standardized Non-OR Procedural Time Out Checklist.

REFERENCE(S)/AUTHORITY:

The Joint Commission's Speak Up The Universal Protocol Poster
The Joint Commission 2016 National Patient Safety Goals Universal Protocol
Institute for Clinical Systems Improvement. Health Care Protocol. Non-OR Procedural Safety