


GASTROINTESTINAL ENDOSCOPY CHECKLIST

SIGN IN <i>To be completed by the nurse on admission to procedure room prior to administration of sedation or commencing procedure</i>	MEDICATION CHECK <i>To be completed prior to the administration of medication</i>	SIGN OUT <i>To be read out loud by the assistant before anyone leaves the procedural area</i>
<input type="checkbox"/> Confirm all individuals have introduced themselves. <input type="checkbox"/> Confirm patient identity.	Confirm method of local anaesthesia and/or sedation chosen by patient: <input type="checkbox"/> Entonox <input type="checkbox"/> Intravenous <input type="checkbox"/> Throat spray <input type="checkbox"/> None	PR and rectal intubation observed? <input type="checkbox"/> N/A <input type="checkbox"/> Yes Samples and labelling correct? <input type="checkbox"/> N/A <input type="checkbox"/> Yes Correct report: <input type="checkbox"/> Yes
<input type="checkbox"/> Confirm and record procedure to be undertaken:		
Clinical setting: <input type="checkbox"/> Elective <input type="checkbox"/> Emergency		
Check consent taken: <input type="checkbox"/> Verbal <input type="checkbox"/> Written <input type="checkbox"/> Unable, document best interest decision		
Does the patient have a known allergy? <input type="checkbox"/> No <input type="checkbox"/> Yes, specify:	Are there any contraindications for administration of: Entonox? <input type="checkbox"/> N/A <input type="checkbox"/> No <input type="checkbox"/> Yes Intravenous sedation? <input type="checkbox"/> N/A <input type="checkbox"/> No <input type="checkbox"/> Yes Buscopan? <input type="checkbox"/> N/A <input type="checkbox"/> No <input type="checkbox"/> Yes	<input type="checkbox"/> Yes
Is the patient receiving anticoagulant or antiplatelet therapy that requires consideration? <input type="checkbox"/> No <input type="checkbox"/> Yes, specify:		<input type="checkbox"/> N/A <input type="checkbox"/> Yes
Have anticoagulant/antiplatelet drugs been stopped pre-procedure? <input type="checkbox"/> No <input type="checkbox"/> Yes		<input type="checkbox"/> N/A <input type="checkbox"/> Yes
Has the patient had bridging therapy? <input type="checkbox"/> No <input type="checkbox"/> Yes, last dose:		<input type="checkbox"/> N/A <input type="checkbox"/> Yes
Confirm recent blood results if required: INR: Blood sugar:	AFFIX BAR CODED PATIENT LABEL HERE	Specialty Documents 
<input type="checkbox"/> Confirm correct screen on Endosoft. <input type="checkbox"/> Confirm monitoring (SpO₂) and IV access present.	Signature for MEDICATION CHECK (Nurse):	Signature for SIGN OUT (Nurse):
Signature for SIGN IN (Endoscopist):	Date: Time:	Date: Time:
Date: Time:	Date: Time:	Date: Time:

GASTROINTESTINAL ENDOSCOPY CHECKLIST

This **LocSSIP** applies to all gastrointestinal endoscopic procedures (including insertion of PEG and ERCP) conducted in CDDFT endoscopy units. For endoscopic procedures conducted in theatre, the standard theatre 'WHO' Team Brief and Surgical Safety Checklist should be used.

This LocSSIP also applies to gastrointestinal endoscopic procedures performed 'off unit' in areas such as Radiology and Critical Care.

Must-do procedural steps

1. To ensure compliance with best practice:
 - a. CDDFT's endoscopy procedural checklist **must** be used.
 - b. The checklist **must** be completed at the time of conducting the procedure.
 - c. The *operator* **must** dispose of all sharps (if used) before leaving the procedural area.
2. To ensure the correct procedure is undertaken:
 - a. The patient's identity, expected procedure and consent **must** be confirmed.
 - b. If applicable, the operator **must** confirm that Endosoft is displaying the correct screen.
3. To minimise the risk of procedure related bleeding:
 - a. Consideration **must** be given to anticoagulant/antiplatelet therapy, cessation of/bridging therapy and relevant recent blood results.
4. To reduce the risk of sedation related hypoxaemia:
 - a. Appropriate monitoring including pulse oximetry (SpO₂) **must** be used if sedation is given.
5. To minimise the risk of medication related side-effects:
 - a. Consideration **must** be given to contra-indications of drugs being administered.
6. To maintain quality of procedure:
 - a. Endoscopic procedures **must** be performed in accordance with guidelines and standards issued by the British Society of Gastroenterology.
7. To ensure that residual sedative drugs do not remain in the cannula following the procedure:
 - a. Any cannula used **must** during the procedure **must** be flushed before the patient leaves the procedural area.

Associated guidelines: Surgery Care Group Area LocSSIP describing all NatSSIP principals which apply to this invasive procedure and checklist.