


# BRONCHOSCOPY/ENDOBRONCHIAL ULTRASOUND CHECKLIST

<b>SIGN IN</b> <i>To be completed by the individual conducting the procedure prior to commencing</i>	<b>TIME OUT</b> <i>Before sedation</i>	<b>SIGN OUT</b> <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 and procedure. <input type="checkbox"/> Confirm patient fasted for 4 hours.	<b>Oxygen saturation pre-procedure:</b> % <input type="checkbox"/> On room air <b>OR</b> <input type="checkbox"/> On supplementary oxygen, FIO <sub>2</sub> = _____ L/minute	<input type="checkbox"/> Confirm all instruments and controlled drugs have been accounted for.	
<b>Written consent:</b> <input type="checkbox"/> Yes <input type="checkbox"/> Unable, document best interest decision.	<b>Does the operator feel safe to proceed with the present level of oxygen saturation, pulse and blood pressure?</b> <input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Confirm details of the procedure have been recorded.	
<b>Does the patient have a known allergy?</b> <input type="checkbox"/> No <input type="checkbox"/> Yes, specify:	<b>Any critical or unexpected steps you want the team to know about?</b> <input type="checkbox"/> No <input type="checkbox"/> Yes, specify:	<input type="checkbox"/> Confirm the key concerns for recovery and management of this patient have been recorded and communicated to the appropriate staff.	
<b>Confirm operator appropriately:</b> <input type="checkbox"/> Trained <b>OR</b> <input type="checkbox"/> Supervised by:			
<b>Is the patient on any anticoagulation/antiplatelet?</b> <input type="checkbox"/> No <input type="checkbox"/> Yes, specify:	<b>Nurse in charge to confirm:</b>	<b>Intravenous cannula flushed?</b> <input type="checkbox"/> Yes <input type="checkbox"/> N/A	
<b>Confirm recent blood results (date _____):</b> Platelets:                      PT:                      APTT:	<input type="checkbox"/> The sterility of the instruments has been confirmed. <input type="checkbox"/> Adrenaline 20ml of 1:20000 drawn up.	<b>Have the specimens been labelled?</b> <input type="checkbox"/> Yes <input type="checkbox"/> No specimens taken	
<input type="checkbox"/> Confirm imaging and report reviewed and displayed.	<b>Are there any equipment issues or concerns?</b> <input type="checkbox"/> No <input type="checkbox"/> Yes, specify:	<input type="checkbox"/> Confirm follow-up arrangements are clear.	
<p style="text-align: center;"><b>AFFIX BAR CODED PATIENT LABEL HERE</b></p>	<b>Signatures (print name)</b> Operator: _____ Date: _____ Assistant: _____ Time: _____ Supervisor: _____ Location: _____		Specialty Documents 

# BRONCHOSCOPY/ENDOBRONCHIAL ULTRASOUND CHECKLIST

This **LocSSIP** applies to all bronchoscopies and endobronchial ultrasounds conducted in endoscopy and the cardiac day unit.

## **Must-do procedural steps**

1. To ensure compliance with best practice:
  - a. CDDFT's bronchoscopy/endobronchial ultrasound checklist **must** be used.
  
2. To eliminate the risk of 'wrong patient' (**NEVER EVENT**):
  - a. Operator **must** confirm patient identity and consent.
  - b. Operator **must** have viewed the radiographs prior to conducting the procedure.
  
3. To reduce the risk of aspiration of gastric contents during the procedure:
  - a. The patient **must** be fasted for 4 hours.
  
4. To reduce the risk of serious or potentially life threatening bleeding:
  - a. Blood results **must** be checked and abnormalities in clotting corrected if indicated.
  
5. To ensure that residual sedative drugs do not remain in the cannula following the procedure:
  - a. Any cannula used during the procedure **must** be flushed before the patient leaves the procedural area.

Associated guidelines:

- Acute and Emergency Care Group Area LocSSIPs describing all NatSSIP principals which apply to this invasive procedure and checklist.
- <https://www.brit-thoracic.org.uk/standards-of-care/guidelines/bts-guideline-for-diagnostic-flexible-bronchoscopy-in-adults>