Safe surgery checklist for cataract surgery in ophthalmic day centres in India

Sir,

Surgery is the only method to alleviate disability in several common conditions. However, unsafe surgery can lead to morbidity and mortality. In industrialised countries, nearly half of all adverse events in hospitalised patients are related to surgery and at least half of them are considered preventable.

In 2008, the World Health Organisation (WHO) created the implementation manual for the WHO surgical safety checklist. The checklist was intended to be universally applicable with adaptations to fit specific disciplines. It is administered at three critical junctures: before induction of anaesthesia, before skin incision, and before patient leaves the operating room.

It was adapted for eye surgeries by The Royal College of Ophthalmologists, UK, in 2010 and the American Academy of Ophthalmology in 2012. In a survey conducted with the members of the Royal College of Ophthalmologists, 94% of respondents considered that a preoperative checklist added value to cataract surgery. However, the participants in the study also recommended inclusion of blood glucose level check from the list.

Table 1: Safe surgery checklist for ophthalmic day centres

| Before anaesthesia | Before incision | Before leaving OT |
|--------------------|-----------------|-------------------|
| **Patient**        | **All team members** | **Nurse and surgeon** |
| Identity           | Introduce with role | Orally confirm with team: Name of procedure performed |
| Procedure          | Surgeon, anaesthetist and nurse | Any equipment issues |
| Site               | Orally confirm patient, site, and procedure | **Nurse** |
| Any allergy        | Instrument, sponge, sharp, suture count correct | **Anaesthetist** |
| Consent            | IOL labelled       | **Nursing team orally confirm** |

| **Nurse**          | **Anaesthetist** | **Surgeon** | **Patient label/name with date of birth** |
|--------------------|-----------------|-------------|------------------------------------------|
| Medical assessment | Anaesthesia machine and emergency medication check | Topical/peribulbar/subtenon anaesthesia | Patient label/name with date of birth |
| Investigations: Blood sugar, urine, ECG, BP, serum creatinine | Are pulse oximeter and ECG monitors connected | Anticipated critical events | **UHID** |
| Pre-anaesthetic evaluation/physician opinion | Does the patient have difficult airway/aspiration risk | Operative duration | Date of surgery: ______ |
| Is the site marked | If yes, are the equipment/assistance available | Vitrectomy | |
| Is IOL calculation/toric lens chart available | Is BP under 140/90 mmHg | Any specific instrument/equipment needed | |
| BP under 140/90 mmHg | RBS (if diabetic): 200 mg/dL | | |
| Duration of starving | Consent taken | | |
| Consent taken | Any concerns | | |

BP: Blood pressure, ECG: Electrocardiography, RBS: Random blood sugar, UHID: Universal Healthcare Identifier, IOL: Intraocular lens, OT: Operation theatre.
different from those at tertiary care hospitals, is suited to ophthalmic day centres in reducing errors [Table 1]. It is more comprehensive. Our proposal is important as it is mandatory for hospitals to have at least entry level NABH accreditation to be eligible for reimbursement by insurance companies. The checklist not only prevents errors but also helps in avoiding violence against doctors.

Financial support and sponsorship
Nil.

Conflicts of interest
There are no conflicts of interest.

Srinivas V Hirekatur, Sindhu H Manjunath
Ophthalmologist and Medical Director, Aditya Netralaya, Bengaluru, 1Medical Student, Kasturba Medical College, Manipal, Karnataka, India

Correspondence to: Dr. Srinivas V Hirekatur, Aditya Netralaya, 244, 7th Cross, 6th Block, 3rd Phase, Banashankari 3rd Stage, Bengaluru - 560 085, Karnataka, India. E-mail: srinivashv83@gmail.com

References
1. World Alliance for Patient Safety. WHO Guidelines for Safe Surgery. Geneva: World Health Organization; 2008.
2. Kelly SP, Steeple LR, Smith R, Azuara-Blanco A. Surgical checklist for cataract surgery: Progress with the initiative by the Royal College of Ophthalmologists to improve patient safety. Eye (Lond) 2013;27:878-82.
3. Available from: https://www.aao.org/patient-safety-statement/opthalmic-surgical-task-force-surgery-checklist-2. [Last accessed on 2016 Nov 06].
4. Available from: https://www.aao.org/Assets/0985ab39-20ce-4779-9322-e718972edd86/635711977904770000/anesthesia-management-of-ophthalmic-surgery-in-geriatric-patients-pd.pdf. [Last accessed on 2017 Mar 05].
5. Available from: http://www.safesurg.org/uploads/1/0/9/0/1090835/eyehospitalchecklist-pdf. [Last accessed on 2016 Nov 06].

This is an open access article distributed under the terms of the Creative Commons Attribution-NonCommercial-ShareAlike 3.0 License, which allows others to remix, tweak, and build upon the work non-commercially, as long as the author is credited and the new creations are licensed under the identical terms.