

VCH Regional Anesthesia Checklist

- ☐ Patient identification
 - Patient states full name, DOB to match consent and ID band
 - 2 person independent confirmation if patient unable
- ☐ Allergies and anticoagulation status reviewed
 - Review meds and necessary blood work
- ☐ Review known patient alerts and factors that may increase risk of LAST and nerve damage
- ☐ Surgical procedure/consent confirmed
- ☐ Regional plan confirmed/site marked
- ☐ Necessary equipment present
 - Drugs labeled
- ☐ Resuscitation equipment immediately available
 - Intralipid, AW devices, suction, vasoactive drugs
- ☐ CAS monitors applied
 - NIBP, SpO2, ECG
 - IV access, O2 prn
- ☐ Aseptic Technique
- ☐ Post-block monitoring plan x 30 min*
- ☐ Perform a new “Time Out” for each new block site*
(*out of OR/peripheral blocks only)