Title: UNIVERSAL PROTOCOL VERIFICATION PROCESS  
Policy Number: EP 3.10  
Regulation Reference: Joint Commission, NPSG  
Effective Date: 05/2017  

Policy Statement:
It is the policy of the Texas Tech University Health Sciences Center El Paso (TTUHSC El Paso) to provide safe and accurate patient care to those patients who are to have invasive procedures in the clinics. This will be accomplished by verifying correct patient, correct procedure, correct side/site and that all necessary equipment, x-rays, consents, and medication are available and ready for use during the procedure. All staff members involved in invasive procedures will take part in completing a check list for each patient undergoing an invasive procedure to verify correct patient, procedure, side etc. Checklists will be completed fully and accurately prior to each procedure.

Scope and Distribution:
This policy applies and will be distributed to all Texas Tech Physicians of El Paso clinics.

Procedure:
Departments shall identify procedures performed in their clinic that expose the patient to more than minimal risk of harm, require site marking, or are of such complexity that universal protocol applies. (see policy EP 1.2) Compliance with universal protocol shall be demonstrated by the completion of a checklist to ensure the following steps have been taken.

1. A pre-procedure process verifies the following:
   a. Correct patient using two identifiers (name and date of birth; staff will not provide identifiers)
   b. Correct procedure
   c. Correct site (the patient is involved in the verification process when possible)
   d. Relevant documentation is available
   e. Diagnostic and radiology test results are displayed
   f. All required equipment is available

2. Procedures requiring marking of the incision or insertion site must be marked. (Sites require marking when there is more than one possible location for the procedure and when performing the procedure in a different location would negatively affect quality or safety.)
   a. The site is marked with indelible ink using initials by the licensed independent practitioner or resident performing the procedure with the patient involved when possible. Adhesive markers are not the sole means of marking the site.
   b. If a patient refuses the site marking, further education will be provided to the patient including the importance and possible implications of refusing the marking. If the patient continues to refuse the marking, the procedure team will verbalize the site of the procedure and document the refusal in the patient’s medical record.

3. A time out is performed immediately before starting the invasive procedure or making the incision.
   a. The time out involves immediate members of the procedure team.
   b. Team members agree on the following: correct patient, site, and procedure to be performed.

4. The Universal Protocol Checklist must be completed in its entirety and placed in the patient’s medical record.
<table>
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<th>Policy Number:</th>
<th>EP 3.10</th>
<th>Original Approval Date:</th>
<th>11/2013</th>
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<tbody>
<tr>
<td>Version Number:</td>
<td>2</td>
<td>Revision Date:</td>
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Signatory approval on file by:

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