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Surgical Assistant Checklists

**Contents**

[SURGERY STAFF AM OPENING CHECKLIST 3](#_Toc55460560)

[ANESTHESIA ASSISTANT FOR THE DAY CHECKLIST 5](#_Toc55460561)

[SURGERY STAFF DAILY AM CHECKLIST 7](#_Toc55460562)

[SURGERY STAFF DAILY AFTERNOON CHECKLIST 9](#_Toc55460563)

[SURGERY STAFF DAILY PM CHECKLIST 10](#_Toc55460564)

[REMINDERS CHECKLIST 13](#_Toc55460565)

[PATIENT CARE CHECKLIST 16](#_Toc55460566)

[SURGERY STAFF WEEKLY CHECKLIST 20](#_Toc55460567)

[SURGERY STAFF MONTHLY CHECKLIST 22](#_Toc55460568)

[OFFICE/HOLIDAY CLOSURE TASKS CHECKLIST 25](#_Toc55460569)

[OFFICE/HOLIDAY RETURN TASKS CHECKLIST 25](#_Toc55460570)

[SURGERY STAFF END OF YEAR CHECKLIST 26](#_Toc55460571)

[SURGERY STAFF INVENTORY CHECKLIST 28](#_Toc55460572)

[INVENTORY FORM 30](#_Toc55460573)

# SURGERY STAFF AM OPENING CHECKLIST

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Item** | **M** | **T** | **W** | **TH** | **F** |
| Clock in after changing into scrubs and office shoes. |  |  |  |  |  |
| Read the daily schedule, review the treatment plans and chart notes of all scheduled patients, confirm schedules match chart notes and estimates, and prepare for patient appointments in accordance with your job description and company protocols and procedures. |  |  |  |  |  |
| Turn on the gas alarm. |  |  |  |  |  |
| Check the gas tank levels, open the lines, and complete the log sheet. |  |  |  |  |  |
| As needed, call Polar to confirm pickup and delivery (before 9 a.m.). |  |  |  |  |  |
| Turn on the PC computer. |  |  |  |  |  |
| Turn on the cone beam CS9300. |  |  |  |  |  |
| Review the day’s patient and staff schedules. |  |  |  |  |  |
| Confirm that the assigned tray set up for each case is complete and matches the schedule. |  |  |  |  |  |
| Review the day’s patient chart review log sheet. |  |  |  |  |  |
| Prepare and hang IV bags. |  |  |  |  |  |
| Turn on lab and room lights. |  |  |  |  |  |
| Complete tray set up for all rooms and confirm all instrumentation the doctor may possibly need is set up in the treatment room prior to bringing the patients back. |  |  |  |  |  |
| Get your keys from the A/R desk sign log sheet. |  |  |  |  |  |
| Turn on the anesthesia machines, connect the anesthesia tubing, and calibrate the mini oxygen sensor pass-thru 3 & 4 (test monitor). |  |  |  |  |  |
| Adjust the monitors to match the atomic clocks. |  |  |  |  |  |
| Confirm that blood pressure cuffs are working. |  |  |  |  |  |
| Confirm that pulse oximeters are working. |  |  |  |  |  |
| Confirm that thermometers are working. |  |  |  |  |  |
| Check handpieces and case set up for all implant, BG, and fracture cases. Run water through hand pieces to confirm accurate function. |  |  |  |  |  |
| Place camera in pass-thru, and check the batteries, flash, and memory card. |  |  |  |  |  |
| Turn on the suction machine. |  |  |  |  |  |
| Complete all opening procedures and seat the first patient. |  |  |  |  |  |
| Confirm Bio-Med pick up of hazard bins x2 by 8:30 a.m. |  |  |  |  |  |
| Read and review schedules three days in advance, confirm that all appointment documentation is complete and accounted for, submit schedules that contain missing information to the office manager, prepare case equipment inventory and set up, and confirm with the sterilization tech. |  |  |  |  |  |
| Facilitate efficient surgery staff patient flow, keep patient appointments on-time, and assure dismissal protocols are implemented. Reconcile time schedules daily and problem solve delays and inefficient patient flows with the office manager daily. |  |  |  |  |  |

# ANESTHESIA ASSISTANT FOR THE DAY CHECKLIST

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Item** | **M** | **T** | **W** | **TH** | **F** |
| Complete the team review at 8:00 a.m. for the daily procedures and room usage schedule, and confirm assigned ASA Classification to all scheduled patients. |  |  |  |  |  |
| Confirm IV/Meds/Propofol usage per patient surgery with the doctor. |  |  |  |  |  |
| Draw drugs for all IV patients. |  |  |  |  |  |
| Prepare IV bags in accordance with anesthesia protocols. |  |  |  |  |  |
| Run the anesthesia test strip prior to each case and check the paper supply. |  |  |  |  |  |
| Complete green sheets by the end of the case and place on the doctor’s desk for review. |  |  |  |  |  |
| Reconcile medication logs/books. |  |  |  |  |  |
| Before the end of the day, discuss the Propofol usage for the next day with the doctor, reconcile Propofol usage, and discuss/toss unused IV bags (2 assistants to dispose of meds). |  |  |  |  |  |
| Confirm the next day’s anesthesia assistant, passing assistant, and post-op recovery staff for each case. Review the schedule with the office manager before the end of the day. |  |  |  |  |  |
| Maintain and restock the IV cart. |  |  |  |  |  |
| Ensure all oral sedation IV and general anesthesia patients are NPO prior to appointments. |  |  |  |  |  |
| Ensure a suction team member wipes down the anesthesia machine, machine tubing, wiring, and exam chair with Sani-wipes (in accordance with OSHA standards) prior to moving a patient to recovery or dismissing them. |  |  |  |  |  |
| Ensure all surgery team members execute OSHA standards (e.g., dispose of mask and gloves worn during procedures, wipe down goggles with Sani-wipes, remove clothing worn during surgery and place exterior clothes in laundry bin or OSHA designated disposal container, etc.). |  |  |  |  |  |

# SURGERY STAFF DAILY AM CHECKLIST

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Item** | **M** | **T** | **W** | **TH** | **F** |
| Look at the schedule one week in advance, review implant and bone cases with the office manager, determine which cases require meetings with the office manager to review case details and planning, and schedule lunch meeting to review cases. |  |  |  |  |  |
| Review charts prior to taking patients back to the treatment rooms. Confirm that the registration form is accurate and complete, the health history is accurate and complete, the privacy form is signed, the estimate and consent forms are in the chart, and photo ID is confirmed. Return the chart to the DP if any information is inaccurate or missing. Patients are only brought back for treatment after the chart is complete. |  |  |  |  |  |
| A.m. patients are seated and ready by 8:00 a.m., and vitals, consents, BP, and labels are on the View Box. |  |  |  |  |  |
| Confirm that 3D scans are current and loaded onto the main server to view in the rooms. Confirm spelling of that patient’s name matches patients their driver’s license. |  |  |  |  |  |
| Enter and confirm patient name spelling and x-ray date on scan software. Confirm reconciled data is entered in Kodak. |  |  |  |  |  |
| Record all special instruments/items (e.g., abutments, implants, drills, etc.) that need to be autoclaved on the abutment/item log sheet. Place the item in the “special tub/cup in tub” on the lab counter, and confirm that the item has been returned to you and placed in the appropriate location. |  |  |  |  |  |
| Initial and highlight the master schedule before bringing patients back. |  |  |  |  |  |
| Confirm intakes, fee slips, estimate forms, and special instructions are completed by the surgery staff in the treatment room prior to escorting patients to the dismissal desk. |  |  |  |  |  |
| Check off patient names as treatment is completed on the schedule posted in the lab. |  |  |  |  |  |
| Reconcile and account for all a.m. intakes prior to clocking out for lunch. |  |  |  |  |  |
| Complete a.m. patient medical record data entry into the EMR system. The surgery staff team member who documented the information is required to complete the EMR entry prior to clocking out for lunch. |  |  |  |  |  |
| Return all a.m. patient care phone calls and ensure the written half sheet is completed, reviewed, and signed by the doctor. |  |  |  |  |  |
| All surgery staff team members are responsible for wiping down cabinets, counters, exam rooms, and contaminated areas (in accordance with OSHA standards) prior to moving patients to recovery or dismissing them. |  |  |  |  |  |
| Initial the master schedule for all a.m. treatment patients. |  |  |  |  |  |
| Turn off the suction system after the last a.m. patient. |  |  |  |  |  |
| Check the gas tank levels, turn it off, and complete the log sheet and inventory documentation prior to clocking out for lunch. |  |  |  |  |  |

# SURGERY STAFF DAILY AFTERNOON CHECKLIST

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Item** | **M** | **T** | **W** | **TH** | **F** |
| P.m. patients seated and ready for the doctor by 1:15 p.m. |  |  |  |  |  |
| Check the x-ray duplication cubby and duplicate x-rays, and complete duplication requests by the end of the day after patient care. Confirm accurate data entry in Kodak and CareStream for EMR files, and export to the medical records department. |  |  |  |  |  |
| Review the next day’s schedule and assign surgery rooms and staff patient flow. |  |  |  |  |  |
| Complete the PM patient medical record data entry into EMR system. The surgery staff team member who documented the information is required to complete the EMR entry prior EOD EMR reconciliation. |  |  |  |  |  |
| Write and discuss the thought for the day with the office manager. Keep the original in the office manager basket. |  |  |  |  |  |
| Confirm supply arrivals, verify each item with the packing slip and purchase order, and put away all items after authorization by the doctor. |  |  |  |  |  |
| Verify supplies, reconcile the supply product order book and minimum order cards. Confirm invoice data, item descriptions, photographs, product number, and supplier name are accurate and match the supply book and minimum card documentation prior to restocking supplies. |  |  |  |  |  |
| Oversee the surgery team and confirm all paperwork and tray closure is completed prior to the surgery team dismissing patients from the treatment and consult room. |  |  |  |  |  |
| Call a.m. emergency patients’ referring doctor to provide patient status and answer referring doctor/staff questions. Document in accordance with documentation protocols, and submit the chart note to the DP to reconcile. |  |  |  |  |  |

# SURGERY STAFF DAILY PM CHECKLIST

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Item** | **M** | **T** | **W** | **TH** | **F** |
| Complete final chart review for the next day’s patients by 4:00 p.m. |  |  |  |  |  |
| Call p.m. emergency patients’ referring doctor to provide patient status and answer questions. Document in accordance with documentation protocols, and submit the noted chart to the DP to reconcile. |  |  |  |  |  |
| Confirm tray set up matches the next day’s patient schedule. |  |  |  |  |  |
| Check the gas tank levels, turn them off, and complete the log sheet and inventory documentation. |  |  |  |  |  |
| Put trays in the rooms for the next day a.m. patients. |  |  |  |  |  |
| Review the next day’s schedule with the office manager. Assign the next day anesthesia assistant, x-ray, passing assistant, suction assistant, and post-op recovery staff for each case. Document assignments on the daily schedule. Obtain authorization for the assigned anesthesia and surgery assistants for each case. Confirm the GD assigned to p.m. implant treatment planning. Write up assignments on the schedule, post for the next day, and fax a copy to the ELD at end of the day. |  |  |  |  |  |
| Duplicate and export radiographic EMR records.  Export Kodak – open file = confirm image accuracy.  Confirm labeling date entry (patient name, date of x-ray, and referring doctor) prior to exporting to medical records. Complete all medical records export/duplication requests daily prior to clocking out. |  |  |  |  |  |
| Confirm all operatory rooms have a headrest cover, tape, and IV supplies. |  |  |  |  |  |
| Place the camera on the doctor’s desk, and check the batteries, flash, and memory card. |  |  |  |  |  |
| Complete the body fluid report and submit to the office manager when there is a spill. |  |  |  |  |  |
| Turn off the anesthesia machine monitor, verify the machine is off, and check the paper supply. |  |  |  |  |  |
| Break down the pass-thru anesthesia machines. |  |  |  |  |  |
| Check the soda lime canister and change if needed. Take the tubes from the anesthesia and O2 machine and hang them on the machine to airdry. |  |  |  |  |  |
| Close pass-through cabinets between 1&2, 3&4. |  |  |  |  |  |
| Turn off all lights in the operatory rooms, lab, hallway, and storage room. |  |  |  |  |  |
| Turn off the gas alarm, complete the gas tank inventory, and meet with the office manager. |  |  |  |  |  |
| Turn off the Carestream machine (i.e., the Cone Beam). |  |  |  |  |  |
| Ensure the suction system switch is off. |  |  |  |  |  |
| Check all locking cabinets, return keys to the front desk, and sign the log in/out form. |  |  |  |  |  |
| Initial and highlight the master schedule. |  |  |  |  |  |
| Confirm intakes, fee slips, estimate forms and special instructions are completed by surgery staff in the treatment room prior to escorting patients to dismissal desk. |  |  |  |  |  |
| Account for all p.m. intake forms before clocking out. |  |  |  |  |  |
| Submit chart notes for the office manager and doctor to review and initial. |  |  |  |  |  |
| Double check that all gases and lights are off. |  |  |  |  |  |
| Complete the daily checklist prior to clocking out for the evening, and meet with the office manager regarding the action plan for unfinished tasks and plan for completions. |  |  |  |  |  |
| Review the day’s checklist and account for accurate team initials and documentation of task completion. Confirm team initials are documented by the individual who completed the work. |  |  |  |  |  |
| Confirm check in/out protocols (using password protocols), supervisor initials, and out-of-office notation. |  |  |  |  |  |
| Clock out and confirm the front and exit doors are locked. |  |  |  |  |  |
| Reconcile duplicate and possibly erroneously dated radiograph data in Kodak and Care Stream records (exports to medical records). |  |  |  |  |  |
| Clock out after changing out of scrubs and office shoes. |  |  |  |  |  |

# REMINDERS CHECKLIST

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Item** | **M** | **T** | **W** | **TH** | **F** |
| All employees enter the office through the exit door. Employees park their vehicles in the designated team parking spaces. |  |  |  |  |  |
| Upon entering the building, the alarm system will activate. Use the security code provided to you by the office manager to disarm the alarm. |  |  |  |  |  |
| Clock in/out by entering your arrival/leave time into the computer located in the lab or at the reception desk. If computers are down, see the office manager for the manual time documentation. If a time entry contains an error, you must complete a Time Card Adjustment form. Handwritten entries or clocked in time outside of scheduled hours require the office manager’s initials prior to clocking out for the day. |  |  |  |  |  |
| Refer patient scheduling and financial questions to the business team. |  |  |  |  |  |
| Refer medical records request to the medical records department. |  |  |  |  |  |
| Immediately inform the office manager of equipment failure or malfunction, and log the repair or maintenance on the log sheet. |  |  |  |  |  |
| Keep the receptionist well informed of delays or changes in scheduled procedures. |  |  |  |  |  |
| Discuss and create a plan of action challenges regarding patients and referring doctors with the office manager. |  |  |  |  |  |
| Confirm that the consent forms for bone graft, implant, fracture, and specialty cases are in the charts. If not, request them from the office manager. |  |  |  |  |  |
| Signal business staff for records/form changes. |  |  |  |  |  |
| Signal business staff to obtain charts, make phone calls, and see patients prior to proceeding with treatment. |  |  |  |  |  |
| Ensure surgery staff completes chart out red files for charts taken from the chart prep area, reception counter, radiology, any department desk, or the medical records desk. All patient charts must be accounted for. |  |  |  |  |  |
| Ensure all surgery equipment and supplies are restocked in the assigned designated areas and as directed by the office manager. |  |  |  |  |  |
| Inform the office manager of computer software or hardware errors, interruptions, or malfunctions in computer activity. Execute instruction as directed by the office manager. |  |  |  |  |  |
| Execute the step-in procedure during patient care when supplies, instruments, DRX/WRX photocopies, and charts need to be obtained outside the procedure room. Always have one assistant in attendance with the doctor at all times. |  |  |  |  |  |
| Ensure that the surgery team disassembles the hand piece after each case prior to dismissing the patient from the treatment room. The hand piece requires bur removal and hand piece preparation for sterilization. Non-disassembled hand pieces received are returned to the surgery team on record to disassemble prior to clocking out for the day. |  |  |  |  |  |
| Confirm that instruments are restocked and set up in the treatment room prior to escorting patients to the treatment rooms (i.e., reconcile the instruments to treatment plan). |  |  |  |  |  |
| Remove schedules from the walls and view boxes when doctors or associates visit the office. |  |  |  |  |  |
| Check minimum order cards and the order book, document and list on the supply board in the lab all supplies matching or less than the minimum supply inventory quantity listed on the minimum supply cards. |  |  |  |  |  |
| Using the supply protocol, verify supplies upon arrival with the doctor. Reconcile supply product order book and minimum order cards by confirming that the invoice data, item descriptions, photographs, product number, and supplier name are accurate and match the supply book and minimum card documentation prior to restocking. |  |  |  |  |  |
| Ensure employees execute computer procedures and protocols in accordance with the office PC computer guidelines and as directed by the office manager. Execute password and security code protocols (e.g., office security, computer password). |  |  |  |  |  |

# PATIENT CARE CHECKLIST

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Item** | **M** | **T** | **W** | **TH** | **F** |
| Ensure the surgery team takes patients to treatment rooms in the scheduled order. Pick up the front/first chart from the reception area and ensure the surgery staff has patients seated, prepped, and ready for the doctor on time. |  |  |  |  |  |
| Ensure that the surgery team confirms tray set up is accurate and that all instrumentation the doctor may need or is set up in each treatment room prior to escorting patients to the room. Surgery assistants are responsible for case set up and preparation. |  |  |  |  |  |
| Review next day’s surgery schedule and confirm that the surgery trays are complete, assigned, accounted for, and labeled with the patient name. Double check the patient’s health history and treatment plan against tray sets, photos, and list. All treatment appointments require tray labels. |  |  |  |  |  |
| Confirm that all allergies are noted on the front of the patient chart, intake forms, DMX form, and tray are appropriately labeled. Ensure that Latex allergy patients have latex free gloves in the room prior to the surgery staff bringing the patient into the treatment room. |  |  |  |  |  |
| Confirm all patient models, x-rays, chart notes, and implant components being sent/delivered to attorneys, referring doctors, physicians, or dentists include an enclosure letter from the medical records department and are logged out in the patient's chart. |  |  |  |  |  |
| Complete an IV anesthesia vitals dismissal board prior to the patient signing consent forms. Document their vitals on the vital sheet in the chart, and complete all pre-anesthesia vitals on the vitals board. Keep the board with the patient until dismissal. |  |  |  |  |  |
| Inform the doctor of any known changes in patient concerns, health, medication, and procedures. |  |  |  |  |  |
| Ensure that the doctor is accompanied by a surgical assistant at all times while providing any and all types of patient care. |  |  |  |  |  |
| Take notes and document symptoms and vital signs for all patient consultations, post-operatives, follow-up exams, and same day surgery visits in accordance with intake documentation protocols Enter the data into the patient EMR. |  |  |  |  |  |
| Document treatment plan changes in the patient’s chart prior to treatment and in accordance with the chart note documentation protocol (i.e., 2 vs 4 ext, anesthesia decision change, etc.). |  |  |  |  |  |
| Confirm that all patient consent forms are accurate, complete, and signed in accordance with the Consent Form protocol prior to the doctor beginning treatment. |  |  |  |  |  |
| Complete the estimate forms, fee slips, special instruction sheet, and intake forms prior to dismissing the patient. Obtain fees and fee slips from the doctor before they leave the treatment room. |  |  |  |  |  |
| Ensure all surgery team members stop at the reception desk with all patients upon dismissal. Present completed fee slips, estimate forms, special instructions, and DRX to the receptionist. Wait for release from the receptionist prior to dismissing patients. |  |  |  |  |  |
| Accurately suction and pass instruments during surgical procedures. |  |  |  |  |  |
| Doctor Assist Protocol: Surgery assistant opens instrument packing as the doctor requests during surgery. Remove gloves to open packaging during surgery. Minimize opening unused instruments to avoid excess waste and unnecessary need for sterilization. |  |  |  |  |  |
| Doctor Assist Protocol: The suction assistant confirms tray form is on the paper towel holder with the BP/consent form signed and a verbal review with the doctor and assistants prior to the case. Confirm local anesthesia is prepped for the doctor for easy application, and confirm the procedure is complete and that all teeth are accounted for after the case and before the doctor leaves the room. |  |  |  |  |  |
| Doctor Assist Protocol: The passing assistant monitors the blue bag and repeats medicine instructions from the doctor to the anesthesia assistant. Ensure the consent form matches the schedule and estimate form in the chart. Verbally review the treatment plan with the doctor prior to proceeding with treatment. |  |  |  |  |  |
| The suction assistant or person who takes the patient to the room is responsible for vitals, having x-rays mounted or loaded consents, premed, tray label prep and BP documentation, and assisting the doctor. Must confirm that all instruments necessary for the procedure are accounted for and available prior to signaling the doctor. |  |  |  |  |  |
| During implant, bone, and sinus cases, the third or ungloved assistant is responsible for keeping up with the hardware record during the surgery. |  |  |  |  |  |
| The passing assistant may confirm the RX needed, called in, purchased, or WRX with the doctor and execute before going to start the procedure. |  |  |  |  |  |
| Ensure surgery team members remove contaminated clothing and PPE prior to the patient’s dismissal. PPE is required to be removed, sanitized, or discarded prior to the patient’s review of instructions and office exit in accordance with OSHA. |  |  |  |  |  |
| Return patient phone calls within a two-hour time frame of when the call was received. Document the telephone call chart note in accordance with the company chart note protocol by the end of each day. Turn over patient care calls to the office manager if unable to complete within a two hour time period. |  |  |  |  |  |
| Keep the doctor on time for scheduled patient appointments and up-to-date with schedule changes (e.g., cancellations and added patients). |  |  |  |  |  |
| Ensure family members are in attendance during consultation and post-operative exams. |  |  |  |  |  |
| Confirm radiology images are current and loaded into the patient’s medical records. Confirm accuracy of patient data (e.g., legal name, middle initial, accurate date of service, etc.). |  |  |  |  |  |

# SURGERY STAFF WEEKLY CHECKLIST

|  |  |
| --- | --- |
|  | **Item** |
|  | Reconcile the Aramark scrub and Lab jacket inventory, and confirm that surgery staff placed daily scrubs and jackets in the bin for laundry pick up. Reconcile the laundry form. |
|  | Confirm biohazard service pickup and delivery before 4 p.m. |
|  | Submit a copy of the OHSU autoclave report to the office manager. |
|  | File the autoclave report in the laboratory notebook. |
|  | Confirm sterilization documentation on the log sheet. |
|  | Confirm ultrasonic and cold sterile documentation on the log sheet. |
|  | Write up supply, equipment, and repair orders on the order board. Submit the order to the office manager. |
|  | Restock forms in the book, and ask the office manager for copies to restock. |
|  | Ensure no IV bags are hanging/lying around over the weekend. |
|  | Clean unused food out of the refrigerator and restock. |
|  | Organize the dental student teeth collection. |
|  | Restock patient care forms, and request forms from the medical records department. |
|  | Complete the equipment repair log sheet. |
|  | Submit the body fluid log sheet. |
|  | Ensure anesthesia machine maintenance x2 (pass through 1&2 3&4). Check the hoses, bag, and lime. |
|  | Refill the distilled water and betadine bottles as needed per the office manager. The surgery team informs the doctor of the need for additional Betadine. |
|  | Complete shopping lists at Costco, FM, & Office Depot, and submit to the office manager for review. |
|  | Compete plant maintenance. |
|  | Confirm that the surgery team initials the task checklists daily, and submit the checklist to the office manager on Friday. |
|  | Turn off the doctor’s Acer computer on Friday. |
|  | Complete the OSSEO Care update. |
|  | Reconcile the Nobel Clinician, Care Stream, and Kodak EMR files. |

# SURGERY STAFF MONTHLY CHECKLIST

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| --- | --- |
|  | **Item** |
|  | Check the O2 Machine Maintenance level and test. Confirm the tank is full. |
|  | Check the O2 Machine tank in Recovery and confirm it is full and working. |
|  | Complete and reconcile the repair log sheet for instrument maintenance. |
|  | Complete the emergency protocol. |
|  | Ensure maintenance is completed for any handpiece hoses or other equipment in each surgery room. |
|  | Turn on cautery machine and confirm it is working. |
|  | Confirm rooms and number of hand pieces is accurate (e.g., hand piece x6, Surg #1, Surg #2). |
|  | Confirm the number of working implant drills. |
|  | Recalibrate the CO2 on the DRE Monitor in pass-thru 3&4 and post on the log sheet. Confirm the log sheet is posted next to the machines. |
|  | Complete the CRX inventory for Halcion and Ambien on Wednesdays and at month end. |
|  | Confirm medication rotated in the medicine cabinet. |
|  | Ensure medicines are in the safe inventory on Wednesdays and at month end. |
|  | Complete the crash cart inventory on Wednesdays and at month end. |
|  | Complete the implant inventory. |
|  | Complete the implant tool inventory. |
|  | Complete the implant screwdriver inventory. |
|  | Complete the KLS Ortho anchor inventory at the end of the month. |
|  | Complete the Reconstruct Inventory (Fracture/Trauma, Orthodontic, Bone Graft) at the end of the month. |
|  | Complete the anesthesia machine inventory for hose, blue bag, soda lime, printer paper, and a battery test. |
|  | Check suction tubing in all surgery rooms. |
|  | Change the grey ribbed tubing in all surgery rooms semi-annual. |
|  | Complete the blood pressure cuff inventory with the number of large, standard, and pediatric cuffs. |
|  | Send BP cuffs to be washed or replaced. |
|  | Check BP cuff batteries. |
|  | Complete the Sterilization strip test. |
|  | Confirm that the Sterilization log sheet form documentation is complete and test results are submitted to the office manager. |
|  | Order OHSU sterilization strips. |
|  | Order UCSF Pathology Dept specimen bottles. |
|  | Order OHSU Pathology Dept specimen bottles. |
|  | Order Northwest Pathology Dept specimen bottles. |
|  | Break down and clean the autoclave. |
|  | Check the entidal CO2 filter. |
|  | Check/clean the autoclave filter.  ***Note****: The doctor is to call Dave Elise to confirm the protocol.* |
|  | Return models to referring doctors as directed by the doctor. Send returning models to medical records to type enclosure letters to accompany models. Place a copy of the letter in the patient's chart. |
|  | Distribute collected teeth to dental students in accordance with OHSU protocols, and send to the medical records dept for an enclosure letter. |
|  | Check flashlight batteries. |
|  | Check the batteries in the alarm systems, CO2 machines, doctor’s camera, and doctor’s headlight (use the meter). |
|  | Change the atomic clock batteries as needed per the doctor. |
|  | Change the thermometer batteries as needed per the doctor. |
|  | Check the First Aid Kit. |
|  | Complete the Light Bulb inventory on Wednesdays and at month end. |
|  | Complete the Nobel Clinician, Car Stream, and Kodak updates. |
|  | Confirm that the fire extinguisher date is current. |
|  | Clean out the closet by the bathroom. |
|  | Confirm vaccinations and boosters are current for all staff. |

# OFFICE/HOLIDAY CLOSURE TASKS CHECKLIST

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|  | **Item** |
|  | Confirm polar gas delivery. |
|  | Change the traps. |
|  | Complete uniform cleaning service. |
|  | Ensure staff coverage on the schedule. |
|  | Schedule biohazard pickup service. |
|  | Confirm supplies are ordered and the delivery dates. |

# OFFICE/HOLIDAY RETURN TASKS CHECKLIST

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| --- | --- |
|  | **Item** |
|  | Confirm time clock accuracy. |
|  | Confirm computer data and time accuracy. |
|  | Confirm atomic clock accuracy throughout the office. |
|  | Confirm anesthesia machine data and times are accurate. |
|  | Check the signal system test for all panels and replace bulbs. |
|  | Check messages for patient care follow up. |

# SURGERY STAFF END OF YEAR CHECKLIST

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|  | **Item** |
|  | Execute annual procedures and complete the annual task list. Inform the office manager of any incomplete tasks, changes, and/or unmet due dates. Obtain authorization from the office manager prior to delegating tasks to other employees. |
|  | Ensure OSHA protocols and documents are accurate and current. |
|  | Cupboard inventory (all surgery rooms, laboratory and consult room) match photos list and cupboard. |
|  | Replace all battery operated equipment in the office each fiscal year end on October 31). |
|  | Revise photograph trays to represent the current tray set up. Update tray listings to match tray photos. |
|  | Change suction tubing in rooms 1, 2, and 3. |
|  | Ensure CPR certifications are current. |
|  | Review uniform cleaning, inventory, and purchase requests with the office manager. |
|  | Collect and file year-end maintenance reports. |
|  | Complete and turn in all end-of-year drug log books, and prepare a new drug log book for the new year. |
|  | Update the open/close procedure list. |
|  | Update the supplier/maintenance lists. |
|  | Roleplay/practice patient scenarios and patient protocols. |
|  | Clean all insides of cabinets throughout the entire office. Pull out supplies/instruments, wipe shelving and insides of cabinets, and replace supplies. |
|  | Clean out the pass-through label on all boxes/shelves with instrument/supply names. |
|  | Clean out all rooms and label all boxes/shelves with instrument/supply names. |
|  | Update the supplier instrument manual. |
|  | Deliver all donated supplies and equipment to the donation locations specified by the doctor. |
|  | Revise the 4x6 minimum supply cards for all supplies in the storage room and all surgery supplies storage areas. Confirm that the cards are current. |
|  | Place the current x-ray certification and photographs on the radiology wall. |
|  | Update the Lab rolodex. |
|  | Practice the power outage surgery protocols/suction, oxygen, lights, and hand pieces. |
|  | Organize and clean out the storage room. |
|  | Schedule equipment maintenance and file reports. |
|  | Post new ultrasonic, cold sterile, sterilization, equipment repair, and autoclave log sheets. |
|  | Read the surgery staff protocols and manual and submit revisions to the office manager. |
|  | Confirm/change the atomic clock batteries. |
|  | Confirm/change the BP cuff batteries. |
|  | Confirm/change the thermometer batteries. |

# SURGERY STAFF INVENTORY CHECKLIST

INSTRUCTIONS: Complete all inventories and submit a copy of this form and all inventories to the doctor. Submit the original copy of this form and all inventory originals to the office manager.

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|  | **Item** |
|  | Complete the model and prosthetic supplies inventory. |
|  | Complete the blood spill kit inventory and confirm expiration dates. |
|  | Complete the DRX inventory with Halcion and Ambien on Fridays, Wednesdays, and at month end. |
|  | Confirm medication is rotated in the medicine cabinet. |
|  | Confirm that medications are in the Safe inventory on Fridays, Wednesdays, and at month end. |
|  | Complete the crash cart inventory on Fridays, Wednesdays, and at month end to match the drawers to the list. |
|  | Complete the implant inventory on Fridays, Wednesdays, and at month end. |
|  | Complete the implant screwdriver inventory. |
|  | Complete the implant tool inventory. |
|  | Complete the KLS Ortho anchor inventory on Fridays, Wednesdays, and at month end. |
|  | Complete the Reconstruct Inventory for Fracture/Trauma, Orthodontic, and Bone Graft on Fridays, Wednesdays, and at month end. |
|  | Complete the Light Bulb inventory on Fridays, Wednesdays, and at month end. |
|  | Reconcile the repair/shipping log sheet, and confirm hand pieces/equipment repair is logged. |
|  | Complete the Spore Strip inventory, postcards, strip, and order form. |
|  | Complete the anesthesia machine inventory x2, hoses, blue bag, soda lime, printer tape, and battery. |
|  | Complete the hand piece inventory x6 (Pass through x2). |
|  | Complete the suction system inventory, hoses to chairs, and suction cleaner maintenance. |
|  | Complete the UCSF pathology bottle inventory bottles/lab sheet. |
|  | Complete the Northwest pathology bottle inventory bottles/lab sheet. |
|  | Confirm First Aid Kit is not expired. |
|  | Complete the Pulse Oximeter inventory for BP cuffs to ELD to wash, and confirm extra backup cuffs inventory. |
|  | Complete the battery usage inventory by using the meter to measure battery life for the doctor’s camera, security alarm system, CO2 machine, hand pieces, AED machine, and flashlights. |

# INVENTORY FORM

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| **Item** | **Qty on Hand** | **Qty Needed** |
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