# Preoperative Checklist

**Patient Name:** ………………… **Date of Surgery:** ………………… **Procedure:** …………………
**Surgeon:** ………………… **Hospital ID (SIP/NHC):** …………………

## 1. Identification

- [ ] Confirmed full name and ID with patient
- [ ] Correct side and site marked
- [ ] Consent form signed and scanned
- [ ] Allergy status documented

## 2. Clinical Evaluation

- [ ] Complete medical history reviewed
- [ ] Neurological exam updated (GCS, focal signs)
- [ ] Seizure history evaluated (if applicable)
- [ ] ASA classification assigned: _* [ ] Functional status recorded (e.g. Karnofsky/Rankin): _

## 3. Imaging

- [ ] MRI reviewed
- [ ] CT reviewed
- [ ] Neuronavigation data uploaded (if applicable)
- [ ] Vascular imaging reviewed (CTA/MRA/DSA)
- [ ] Functional imaging (fMRI/DTI) evaluated (if required)

## 4. Laboratory & Preanesthesia

- [ ] CBC
- [ ] Coagulation profile
- [ ] Electrolytes, renal function
- [ ] ECG (if >40 or cardiac history)
- [ ] Anesthesia evaluation completed
- [ ] COVID test (if required)

## 5. Medication & Preparation

- [ ] Antiepileptics continued (if indicated)
- [ ] Anticoagulants/antiplatelets managed appropriately
- [ ] Corticosteroids administered (if edema/mass effect)
- [ ] Antibiotic prophylaxis ordered

- [ ] DVT prophylaxis planned
- [ ] Bowel prep (if spinal or indicated)
- [ ] Blood group and crossmatch done

# 6. Logistics

- [ ] ICU / HDU bed reserved
- [ ] Neuronavigation system available
- [ ] Microscope / endoscope / neuro-monitoring prepared
- [ ] Special equipment (clip, shunt, stimulator) ready

# 7. Patient Instructions

- [ ] NPO status confirmed
- [ ] Preop hygiene and shaving (if needed)
- [ ] Jewelry and prostheses removed
- [ ] Psychological support offered

# 8. Team Briefing (WHO Surgical Safety)

- [ ] Surgical team briefing completed
- [ ] Surgical pause/time-out planned

# Final Check

- [ ] All documentation uploaded to EHR
- [ ] Checklist reviewed and signed by responsible physician

**Signed by:** ……………………………… **Date/Time:** …………………………………