

13.0. Ensuring Correct Patient/Correct Procedure/Correct Site

13.1. The Air Force Dental Service (AFDS) is committed to a culture of Patient Safety and the delivery of safe care.

13.2. All DTFs will utilize TeamSTEPPS® concepts and processes.

13.2.1. Essential tenets to ensure the delivery of safe dental care include:

13.2.1.1. COMMUNICATION: Provider-Technician-Patient.

13.2.1.2. TEAMWORK: ALL treatment team members are empowered.

13.2.1.3. SITUATION MONITORING.

13.3. As driven by the National Patient Safety Goals (NPSGs), all DTFs will integrate The Joint Commission's (TJC) Universal Protocol (UP) for Preventing Wrong Site, Wrong Procedure and Wrong Person Surgery™ as outlined in this chapter as standard practice.

13.4. The AFDS has defined its Universal Protocol for the Non-Operating Room Environment consistent with TJC's UP. It consists of three vital components:

13.4.1. **PRE-PROCEDURE VERIFICATION (1)** - Active communication by all team members performed prior to donning personal protective equipment (PPE) to include confirmation of Correct Patient / Correct Procedure / Correct Site is critical. When possible, the patient is involved in the verification process.

13.4.1.1. To ensure CORRECT PATIENT, the dental team must confirm the patient's identity before initiating treatment. In compliance with National Patient Safety Goal (NPSG) #1, the two DoD and AFMS standard patient identifiers are:

13.4.1.1.1. Patient's FULL NAME.

13.4.1.1.2. Patient's DATE OF BIRTH (DOB).

13.4.1.2. To ensure CORRECT PROCEDURE and CORRECT SITE prior to any irreversible / invasive dental procedure (including administration of any sedative / anesthetic medications) perform the following:

13.4.1.2.1. Review the dental record including medical history, laboratory findings, and appropriate charts.

13.4.1.2.2. Review appropriate radiographs.

13.4.1.2.2.1. Ensure radiographs match the patient

13.4.1.2.2.2. Ensure proper radiograph orientation.

13.4.1.2.3. Review referral / consultation forms (if applicable).

13.4.1.2.3.1. Obtain verbal confirmation from referring provider if there is any possibility for confusion.

13.4.1.2.4. Have the patient describe their understanding of the procedure.

13.4.1.2.4.1. Confirm their description agrees with the treatment plan and any signed informed consent (if not, then reaccomplish).

13.4.1.2.4.2. Avoid asking questions that require only a "yes or no" answer when verifying understanding.

13.4.1.2.5. Ensure required treatment instrumentation, equipment and materiel is present, appropriate and sterile.

13.4.1.2.6. Correct discrepancies before starting the procedure.

13.4.2. **MARK THE PROCEDURE SITE OR REPRESENTATION (2)**

13.4.2.1. Utilize at least one of the following marking methods:

13.4.2.1.1. The dental diagram on the SF 603 / 603A (section 9).

13.4.2.1.2. AF Form 935.

13.4.2.1.3. Computer screen / radiographs (using the MiPACS[®] marking tool).

13.4.2.1.4. Actual site - if appropriate (and consistently dependable).

13.4.3. **THE AFDS TIME-OUT (3)** - Accomplished immediately before the initiation of every irreversible / invasive procedure (all team members present, proper procedural PPE, all required treatment material in place).

13.4.3.1. Injection of local anesthesia (when utilized) represents the beginning of the invasive / irreversible treatment procedure.

13.4.3.2. The dental provider is responsible to ensure THE AFDS TIME-OUT is initiated; the entire team is equally empowered and responsible to ensure the time-out is successfully completed.

13.4.3.3. THE AFDS TIME-OUT must be performed VERBALLY with EFFECTIVE COMMUNICATION between Provider, Technician and Patient.

13.4.3.4. Ensure that THE AFDS TIME-OUT diagram (Attachment 1) is posted in every DTR in plain view to all team members and in accordance with any local facility regulations / requirements.

13.4.3.5. THE AFDS TIME-OUT verifies / ensures **WHO, WHAT, WHERE**.

13.4.3.5.1. **WHO**: Verbally re-confirm correct patient.

13.4.3.5.2. **WHAT**: Verbally re-confirm correct procedure to be performed.

13.4.3.5.3. **WHERE**: Verbally and visually re-confirm correct procedure site directly on patient.

13.4.3.5.3.1. Verify proper site using:

13.4.3.5.3.1.1. References / landmarks.

13.4.3.5.3.1.2. Anatomical structures.

13.4.3.5.3.1.3. Tooth identification.

13.4.3.5.3.1.3.1. Count teeth from established references.

13.4.3.5.3.1.3.2. Consider the presence of erupted / unerupted 3rd molar teeth.

13.4.3.5.3.1.3.3. Consider the possibility of retained primary teeth.

13.4.3.5.4. ALL team members MUST AGREE before treatment begins

13.4.4. INTERRUPTIONS: THE AFDS TIME-OUT must be re-accomplished immediately prior to re-initiating procedure following any intra-procedural interruption.

13.4.5. A “Time-Out completed” statement must be documented in the treatment narrative on the SF 603 / 603A, e.g., “The dental team verified correct patient identity and completed pre-procedural verification steps and time-out prior to initiating [*specific teeth AND / OR site AND procedure*]. Re-verification was continuous throughout the procedure.”

ATTACHMENT 1
THE AFDS TIME-OUT

**** THE AFDS TIME-OUT ****

Dental Team/Patient in Agreement:

Who

- Correct patient -

What

- Correct procedure -

Where

- Verify site utilizing recognized reference(s)/landmark(s) -

- from AFDS Universal Protocol/Non-Operating Room