



UNIVERSAL PROTOCOL

PROCEDURE: EXCISION OF MASS

PRE-PROCEDURE VERIFICATION was completed per UP policy:

Required:

- Patient identification verified by full name and either date of birth/MRN
- Documents (Consent and current H&P/progress/clinic note) confirm correct patient, correct procedure/site
- Accurately completed/signed procedure consent

If applicable:


- Correct diagnostic/Imaging test results.
- Type and Screen required for this procedure? If so is BBS current/valid check date in CAS
- Any required blood products, implants, devices and/or special equipment for the procedure

SITE MARKING:

- Completed as required by UP policy (site marked with word "Yes" or "block" for anesthesia site mark or use of alternative site marking process)
- Site marking not applicable

REQUIRED HARD STOP TIME-OUT:

- Correct patient identity
- Correct marked site
- Accurate, signed procedure consent form
- Agreement on procedure to be performed
- Need to administer pre-procedure antibiotics
- Safety precautions based upon the patient's history or medication use

Signature/Title *	Print Name	Date	Time
 / PHTAYAKON	PHTAYAKON		
ATTENDING			

\* Ensures all components of the UP have been completed. This documentation can be completed by provider performing procedure or any team member assisting in procedure.