

# North Bay Regional Health Centre

## Clinical Services Surgical Booking Checklist

**Patient Name:** \_\_\_\_\_

**Health Card Number:** \_\_\_\_\_

**Pre-operative Assessment Package:** Required patient documentation for booking Surgery.

Incomplete packages will be returned to the Surgeon's office for completion and the patient will not be booked for surgery until the completed package is received within the required time frame.

### Surgeon Office to send complete package to Pre-Admission Clinic (PAC)

- Completed electronic booking record
- Completed Clinical Services Pre-operative questionnaire form (completed by patient or delegate)
- Signed and witnessed surgical consent form
- Signed blood consent or refusal of blood products (as required)
- Consult report from internal medicine (if consult is required, report must arrive prior to PAC appointment)
- Surgeon's history and physical dictated. Date Dictated: \_\_\_\_\_
- Pre-Op Orders, Pre-Printed Orders (as required)
- Provided the patient with the "How to Prepare for Surgery" instruction sheet
- Dental surgery – history and physical from family doctor

**\*Please send checklist with PAC Package**

**Completed by:** \_\_\_\_\_ (print name & position title)

**Surgeon Office:** \_\_\_\_\_

**Date:** \_\_\_\_\_

### For hospital use only

- Forward to PAC for processing
- Incomplete documentation, return to Surgeons office

Signed: \_\_\_\_\_

(OR booking clerk)

**Receiving the completed PAC package allows for necessary patient assessment far enough in advance of the surgery date to ensure improved patient outcomes.**