

Point prevalence of surgical checklist use in Europe: relationship with hospital mortality.

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<https://psnet.ahrq.gov/issue/point-prevalence-surgical-checklist-use-europe-relationship-hospital-mortality>

The initial evidence supporting the impact of the World Health Organization's surgical safety checklist was a cohort [study](#) that found a significant reduction in mortality associated with the use of the checklist. More recently, the mandated adoption of surgical checklists in [Canada](#) failed to show any benefits on surgical outcomes. This retrospective point prevalence study evaluated [checklist](#) use in 426 hospitals across 28 European nations, involving more than 45,000 patients undergoing noncardiac inpatient surgery. Notably, there was striking variation in surgical checklist exposure, with checklists used for 0% to 99.6% of patients, depending on the nation. The use of surgical checklists was associated with lower hospital mortality, even after adjusting for risk factors. However, it is unclear from this study whether this improvement is due to the checklist or rather checklist usage is a process measure indicating higher overall perioperative quality. A prior AHRQ WebM&M [perspective](#) reviewed best practices for creating effective checklists.