
Editorial

Atul Gawande's book, *The Checklist Manifesto*, is a New York Times best seller. The theme and checklist seem simple enough. He looks at checklists and its application in various disciplines. Its applications in for Airline pilots, construction and especially in medicine. This is no surprise because Atul Gawande is a surgeon practicing in the USA. The book is richly illustrated with anecdotes to support his hypotheses and is indeed very impressive. This book has been so impressive that it has caused many institutions all over the world to keep checklists in place as their standard operating procedure.

What does a checklist do and what is its value? A checklist is a protocol to be followed before embarking on any procedure to make sure that everything is in place before getting started. This checks to determine that everything is in place, ensures that nothing has been overlooked or is missing. This simple method avoids obvious mistakes and opens up communication. For instance, when the patient is wheeled into the operating room, the patient, nurse, surgeon and anesthetist are all introduced to each other. The procedure, the side on which the procedure is to be performed and the reason for which the procedure is to be performed are all verified with the patient. The need for a blood transfusion, other accessories, special requirements, antibiotics, etc. are also checked to determine, if everything is in place. Once everything is in place, the procedure started. This simple routine has helped avoid major errors and complication, send patient satisfaction soaring and reduce morbidity and mortality significantly.

A simple routine (checklist aka protocol) in intensive care units, like handwashing, replacement of catheters and arterial lines in a standardized way, has helped to reduce complications, reduce infections and at the end reduce costs and improve outcomes.

You might think that this is all very tedious with more paperwork. This is not so. Checklists can be made to suit each institution, but once made should be followed completely. Otherwise, the very reason for formulating a checklist is lost. I have found checklists to be a very simple way of avoiding errors and a discipline that helps to improve the way we practice medicine. It helps to improve communication especially in situations, where the patient, nurse, anesthetist and doctor have different cultural backgrounds and speak different languages. Ultimately, it is an effort in the right direction and that is toward improving our efforts to deliver excellent care, improving patient satisfaction and of course, improving outcomes.

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