OSCE checklist for post-operative care

An OSCE checklist for post-operative care covers taking handover, checking airway, breathing and circulation, monitoring observations with NEWS2, checking the wound, drains and fluids, managing pain and nausea and escalating changes early.

OSCE checklist for post-operative care: steps to practise

1. Receive the handover from the recovery team, including the operation, anaesthetic, drains, fluids, pain relief, oxygen and any problems.
2. Wash your hands, introduce yourself, explain what you are doing and confirm identity (name and date of birth) against the wristband.
3. Assess airway, breathing, circulation and level of consciousness, and give oxygen only as prescribed.
4. Take observations at the intervals your policy and the surgical team set, calculate the NEWS2 score and compare with the baseline.
5. Check the wound dressing for bleeding or leakage without removing it unless your policy says, and check drains and tubes for position and output.
6. Check the IV fluids against the prescription, the cannula site and the urine output, and keep a fluid balance chart.
7. Assess pain using a pain scale, and check the prescription and allergies before giving any analgesia or anti-sickness medicine prescribed.
8. Position the patient comfortably, encourage deep breathing and leg exercises, check pressure areas and give VTE prevention as prescribed.
9. Encourage early movement, drinking and eating as soon as the surgical team allows.
10. Wash your hands, record everything and escalate at once to the nurse in charge and the surgical team for a raised NEWS2 score, bleeding, a falling blood pressure, a rising pulse, low urine output, severe pain or new confusion.

What candidates commonly forget

- Not comparing observations with the baseline
- Not calculating and acting on the NEWS2 score
- Missing signs of bleeding
- Not checking drains, fluid balance and urine output
- Giving medicine without checking the prescription and allergies
- Not reporting early changes

Local policy comes first

This is our own practice checklist. Your college, hospital or country may do some steps differently. Where local policy and this list disagree, follow local policy.

Practise the hands-on steps with a classmate or in a skills lab, because an AI patient cannot watch your technique. You can practise the talking part with an AI patient, and try one station free with no sign-up. Next, try Postoperative observations and urgent escalation. Back to the medical surgical nursing OSCE page: medical surgical nursing OSCE, or see the full OSCE checklist list.

Common questions

What is the OSCE checklist for post-operative care?

Take handover, check airway, breathing, circulation and consciousness, take observations with NEWS2, check wound, drains and fluids, manage pain and nausea as prescribed, position, encourage breathing and movement, record and escalate.

What are signs of bleeding after surgery?

A rising pulse, a falling blood pressure, pallor, restlessness, cold clammy skin, low urine output, and a soaked dressing or high drain output. Escalate at once.

How often are observations taken?

As set by the surgical team and your hospital policy, usually more often in the first hours and more often again if the NEWS2 score rises.

Sources

- Royal College of Physicians: National Early Warning Score (NEWS2)
- NMC: standards of proficiency for registered nurses
- NICE NG125: surgical site infections

Checked 2026-11-13. Fees and rules change, so confirm them with the regulator before you book.