OSCE checklist for pre-operative care

An OSCE checklist for pre-operative care covers confirming identity and consent, fasting, checking the notes and tests, preparing the skin and patient and completing the pre-operative checklist before the patient goes to theatre.

OSCE checklist for pre-operative care: steps to practise

1. Wash your hands, introduce yourself and confirm identity with the patient (full name and date of birth) against the wristband, the notes and the consent form.
2. Check that consent is signed and valid, that the patient understands the operation, and that the surgical site is marked if required.
3. Check allergies (medicines, latex, chlorhexidine, iodine and tape) and that an allergy band is on if needed.
4. Check the fasting time for food and drink against your hospital's policy, and check which usual medicines the patient should take or stop, as the surgical or anaesthetic team has instructed.
5. Check the investigations and assessments are complete: blood tests, imaging, VTE risk assessment, and a pregnancy test if your policy requires it.
6. Take baseline observations, calculate the NEWS2 score and record weight. Report any abnormal result to the nurse in charge and the surgical team.
7. Check that the patient has showered or washed if your policy asks, and remove jewellery, make-up, nail varnish, contact lenses and, as your policy says, hearing aids, dentures and prostheses. Store valuables as your policy says.
8. Only remove hair if the surgeon needs it, using electric clippers on the day of surgery, never a razor.
9. Give a gown, fit anti-embolism stockings if prescribed, ask the patient to empty their bladder and give any pre-medication only after checking the prescription and allergies.
10. Complete the pre-operative checklist, hand over to theatre staff, including any special needs, record everything and support the patient and family.

What candidates commonly forget

- Not checking full name and date of birth against the wristband and consent form
- Not checking consent and the site marking
- Missing the fasting time
- Not checking allergies, including latex and chlorhexidine
- Using a razor instead of clippers
- Not reporting abnormal observations before theatre
- Not completing the checklist

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 Pre-operative checks before a hernia repair. 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 pre-operative care?

Confirm identity and consent, check allergies, fasting, medicines and tests, take observations, prepare the patient and skin, give only prescribed medicine, complete the checklist and hand over.

Why avoid razors for hair removal?

Razors can cause tiny cuts that raise the risk of wound infection. Hair is only removed if needed, using clippers on the day of surgery.

What if the patient has eaten or drunk when they should not have?

Tell the nurse in charge and the surgical and anaesthetic team at once, because surgery may need to be delayed.

Sources

- NMC: standards of proficiency for registered nurses
- NICE NG125: surgical site infections
- NICE CG139: infection prevention and control

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