

SUTURING CHECKLIST

NAME: _____

	Completed	Not Completed
1. Check that all necessary equipment is available • Chooses appropriate sized suture		
2. Confirms correct patient (student states)		
3. Obtain informed consent • Indication for test • Complications – pain, bleeding, infection, scar		
4. Wash hands		
5. Cleans area to be sutured		
6. Put on sterile gloves		
7. Holds needle driver properly • Thumb and long/ring finger with index as stabilizer		
8. Loads the needle properly • At tip of jaws, 1/3 to 2/3 from point		
9. Needle enters perpendicular to skin		
10. Equal sized bites on both sides		
11. Passes needle through tissue without sawing, following curve of needle		
12. No gap between wound edges		
13. No dog ears		
14. First throw placed square, may be double throw		
15. Maximum of two further single knots		
16. Appropriate tension on wound edges (does not tighten knot excessively)		
17. Documents procedure in patient's chart (examinee can state this) including location of puncture, result of Allen's test, and any complications.		
18. Patient comfort was priority		
19. Maintained sterility appropriately throughout the procedure.		

RESULT (CHECK ONE): **SATISFACTORY** _____ **REQUIRES ADDITIONAL TRAINING** _____

EXAMINER NAME: _____