SOP · PLS-SOP-001 · Version 1.0 · Approved by the ASF Expert Committee

Supports: 55.1

At a glance

- Every patient has a documented assessment of suitability before surgery (PLS-FRM-001).
- The assessment covers medical conditions, medicines, smoking, body weight, and expectations.
- A patient who is unsuitable, or whose expectations are not realistic, is not booked until the issue is resolved.
- The surgeon signs the assessment and the decision.
- Stop and get help straight away if: surgery is booked for a patient with no recorded suitability assessment.

1. Purpose

To make sure only suitable patients with realistic expectations go to surgery (55.1).

2. Scope

Applies to	Clinical and support staff in the hospital
Locations	All wards, clinics and departments of the facility
When	Whenever the activity described is carried out
Does not apply to	Activities covered by another document listed in section 15

3. Definitions

Term	Meaning
Clinical lead	The doctor or nurse in charge of the area at the time

4. Background

To make sure only suitable patients with realistic expectations go to surgery (55.1).

5. Responsibilities

Role	Responsibility	Competence
Surgeon	Carries out and signs the suitability assessment	Clinical lead
Pre-admission nurse	Records the history and checks the medicines	Surgeon

6. Materials and equipment

Item	Requirement	Condition
Records and forms named in this document	Current version	Checked before use

7. Safety

- Stop and call for help if a patient is at immediate risk. Do not delay urgent care to complete paperwork.

8. Before you start

- Confirm the forms and equipment named in this document are available and current.

9. Procedure

Step 1. Assess.

- Assess medical conditions, medicines, smoking, weight and expectations (PLS-FRM-001).

Key point: Assessed.

Step 2. Decide.

- Decide suitability and record it. Do not book an unsuitable patient until the issue is resolved.

Key point: Decided.

Step 3. Sign.

- The surgeon signs the assessment before the date of surgery.

Key point: Signed.

10. Decision points

- No decision points in this procedure.

11. Special situations

Situation	Action
Out of hours	Follow the same steps. Use the on-call contact on the wall of the area.

12. Escalation

- Any serious problem goes to the duty clinical lead at once and to the clinical director the same day.

13. Monitoring

Measure	Target	Frequency	Owner	If not met
Patients with a signed assessment before surgery	100%	Monthly	Clinical lead	Cancel the booking
Assessments that record expectations	100%	Monthly	Clinical lead	Repeat the assessment

14. Records

Record	Kept in	Retention
Record named in this document	Patient record or the area file	the period set by the facility’s records policy years

15. Training

- Staff are trained in this document at induction and refreshed each year, with a recorded competency check.

16. Related documents

ID	Title	Use
PLS-FRM-001	Suitability assessment record	Record
CLN-SOP-005	VTE risk assessment and prophylaxis (existing, reused)	SOP

17. Evidence

Reference	Note
E-006	ASF Policy Framework v1.2. Adapted.
E-009	ASF Expert Committee consensus.

18. Change history

Version	Date	What changed	Approval
1.0	the date of approval	First version	set Expert Committee approval

E-learning for this document

- **Plastic & Cosmetic Surgery Safety Endorsement** (AMB-19)

References

- Accréditation Sans Frontières (2026). ASF Policy Framework v1.2. (E-006)
- Accréditation Sans Frontières (2026). ASF Expert Committee consensus on Standard 1. (E-009)

Download this document as PDF

Download this document as an editable Word file