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Liposuction Services Inspection Checklist- Random

Name of the Facility: _____

Date of Inspection: ____/____/____

Ref.	Description	Yes	No	N/A	Remarks
5	STANDARD ONE: REGISTRATION AND LICENSURE PROCEDURES				
5.5.	The health facility shall provide documented evidence of the following, but not limited to the following:				
5.5.1.	Transfer of critical/complicated cases when required				
5.5.2.	Patient discharge				
5.5.3.	Clinical laboratory services				
5.5.4.	Equipment maintenance services				
5.5.5.	Laundry services				
5.5.6.	Medical waste management as per Dubai Municipality (DM) requirements				
5.5.7.	Housekeeping services.				
5.6.	The health facility shall maintain charter of patients' rights and responsibilities posted at the entrance of the premise in two languages (Arabic and English).				
5.7.	The health facility shall have in place a written plan for monitoring equipment for electrical and mechanical safety, with monthly visual inspections for apparent defects.				
5.8.	The health facility shall ensure it has in place adequate lighting and utilities, including temperature controls, water taps, medical gases, sinks and drains, lighting, electrical outlets and communications.				
6	STANDARD TWO: HEALTH FACILITY REQUIREMENTS				
6.3.	The health facility should install and operate equipment required for provision of the proposed services in accordance to the manufacturer's specifications.				

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6.5.	The health facility design shall provide assurance of patients and staff safety.				
6.7.	Day Surgical Centers opting to perform liposuction services that do not have fully equipped Intensive Care Unit (ICU) capabilities shall have ventilators and hemodynamic monitoring equipment on-site to perform necessary patient resuscitation.				
7	STANDARD THREE: HEALTHCARE PROFESSIONALS REQUIREMENTS				
7.1.	Only a DHA licensed Specialist or Consultant Plastic Surgeon shall be permitted to perform liposuction. Liposuction procedures should be a consultant led service at all times.				
7.2.	The Privileging Committee and/or Medical Director of the health facility shall privilege the physician aligned with his/her education, training, experience and competencies. The privilege shall be reviewed and revised on regular intervals. The privileged Plastic Surgeon shall comply with the following:				
7.2.4.	Hold an active Advanced Cardiac Life Support (ACLS) certification.				
7.3.	A physician shall be supported by a minimum of two (2) perioperative Registered Nurses (RNs) for each liposuction procedure.				
7.5.	There must be a dedicated RN in the recovery area to monitor the patient until discharge.				
8	STANDARD FOUR: PRE-OPERATIVE EVALUATION AND INFORMED CONSENT				
8.1.	A detailed medical history with respect to any previous disease, drug intake and prior surgical procedures shall be taken of any patient indicated for liposuction.				
8.4.	Pre-operative laboratory testing should be performed to include haemoglobin level, blood counts including platelet counts, bleeding and clotting time (or prothrombin and activated partial thromboplastin time) blood chemistry profile including liver function tests, pregnancy test for women of childbearing age and electrocardiogram (ECG) and chest X-Ray				

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	for patients aged 50 years or more.				
8.7.	Informed consent shall include verbal consultation and explanation and the provision of written educational material and discussion with patient including but not limited to:				
8.7.1.	Alternatives to liposuction.				
8.7.2.	All usual and occasional side effects and complications e.g. swelling, pain seroma, haematoma, hyperpigmentation.				
8.7.3.	All potentially, life threatening complications e.g. fat embolism syndrome (FES), pulmonary oedema and necrotizing fasciitis sepsis, perforation of abdominal or thoracic viscera, cardiac arrest, hypotension and haemorrhage.				
8.7.4.	The possibility of a poor cosmetic and surgical outcome.				
8.7.5.	The training and experience of the physician and supportive surgical team.				
8.7.6.	Limitations of the procedure and if more procedures are needed for proper results.				
9	STANDARD FIVE: INTRA OPERATIVE MANAGEMENT				
9.1.	Liposuction should be limited to 5,000 ml of total aspirant to include supernatant fat and fluid per procedure. A foley catheter should be inserted if more than 3,000 ml of liposuction is needed.				
9.2.	For liposuction as an adjunct to other procedures, there should be a maximum of 2,000 ml total aspirate volume per procedure.				
9.8.	In addition to the above, devices or drugs material must be made immediately available and include a stethoscope, source of oxygen, self-inflating bag-valve-mask device and emergency crash cart.				
9.10.	Day Surgical Centers providing liposuction service shall have a signed written transfer agreement with a nearby hospital to ensure timely transfer of complicated cases.				

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