

Office-Based Surgical Suite Startup Checklist

A readiness tool for physician practices adding or expanding office-based surgical services

Purpose

Use this checklist before opening, expanding, or reorganizing an office-based surgical suite. It is designed to help practices review facility classification, anesthesia scope, patient selection, emergency preparedness, staffing, credentialing, documentation, infection control, quality monitoring, and compliance readiness.

How to Use This Checklist

Complete the checklist before construction, equipment purchase, service expansion, accreditation review, or go-live. Assign an owner to each section, document gaps, verify state and accreditation requirements, and maintain evidence of completion in a centralized readiness file.

1. State Requirements and Facility Classification

☐	Checklist item	Notes / owner
☐	Identify the state office-based surgery, office-based anesthesia, facility registration, professional board, or healthcare facility requirements that apply to the proposed suite.	
☐	Determine whether the facility requires licensure, registration, certification, accreditation, inspection, or notice to a state agency or professional board.	
☐	Confirm whether requirements change based on anesthesia level, procedure type, patient condition, provider specialty, ownership, or facility setting.	
☐	Document whether the suite will use local anesthesia, minimal sedation, moderate sedation, deep sedation, regional anesthesia, or general anesthesia.	
☐	Confirm whether the proposed scope is permitted in an office-based surgical setting or requires ASC licensure or another facility classification.	
☐	Review zoning, occupancy, fire/life safety, building code, infection control, and construction implications before renovation or expansion.	
☐	Create a regulatory readiness file with state rules, accreditation standards, policies, inspection expectations, and assigned owners.	

2. Procedure, Patient, and Anesthesia Scope

☐	Checklist item	Notes / owner
☐	Define specialties, procedure types, anticipated case volume, average case length, recovery needs, and exclusion criteria.	
☐	Create written patient selection criteria based on procedure risk, anesthesia level, comorbidities, airway risk, medications, BMI, and recovery needs.	
☐	Confirm anesthesia provider qualifications, supervision requirements, monitoring standards, credentialing expectations, and emergency response capabilities.	
☐	Define when a case should be moved to an ASC or hospital instead of being performed in the office-based setting.	
☐	Confirm preoperative evaluation, informed consent, timeout, intraoperative monitoring, discharge, and follow-up requirements.	
☐	Review medication storage, emergency medications, controlled substance handling, crash cart, malignant hyperthermia readiness when applicable, and supply controls.	
☐	Confirm recovery space, post-anesthesia monitoring, discharge criteria, escort requirements, and post-procedure instructions.	

3. Facility, Equipment, and Emergency Preparedness

☐	Checklist item	Notes / owner
☐	Review procedure room size, recovery area, clean/dirty separation, hand hygiene access, sterile storage, medication storage, and patient flow.	
☐	Confirm equipment needs for the procedure scope, anesthesia level, monitoring, resuscitation, suction, oxygen, airway management, and emergency response.	
☐	Maintain equipment maintenance schedules, biomedical checks, calibration records, preventive maintenance logs, and service records.	
☐	Create emergency policies for patient deterioration, fire, power outage, oxygen failure, anesthesia emergency, transfer, exposure event, and severe weather.	
☐	Confirm transfer protocols, EMS access, nearest receiving facility, staff emergency roles, and patient transfer documentation.	
☐	Schedule emergency drills and document participation, findings, corrective actions, and closure evidence.	
☐	Confirm signage, emergency exits, fire extinguishers, evacuation routes, SDS access, and facility safety documentation.	

4. Staffing, Credentialing, and Training

<input type="checkbox"/>	Checklist item	Notes / owner
<input type="checkbox"/>	Define provider, anesthesia, nursing, assistant, sterilization, recovery, and administrative roles for each procedure type.	
<input type="checkbox"/>	Verify licenses, certifications, BLS/ACLS/PALS as applicable, malpractice coverage, training records, and competency documentation.	
<input type="checkbox"/>	Create credentialing and privileging files for all physicians, anesthesia providers, and clinical personnel performing or supporting procedures.	
<input type="checkbox"/>	Document competencies for infection control, sterile technique, instrument processing, emergency response, documentation, and patient monitoring.	
<input type="checkbox"/>	Assign accountability for surgical scheduling, patient screening, supply management, logs, reporting, quality review, and corrective actions.	
<input type="checkbox"/>	Schedule onboarding and annual training for OSHA, HIPAA, infection control, emergency drills, equipment use, and suite-specific policies.	
<input type="checkbox"/>	Confirm staffing is appropriate for patient acuity, anesthesia level, procedure volume, and recovery requirements.	

5. Policies, Logs, and Documentation

<input type="checkbox"/>	Checklist item	Notes / owner
<input type="checkbox"/>	Create or update policies for patient selection, scheduling, pre-op, intra-op, post-op, discharge, infection control, sterilization, medication management, emergencies, and transfers.	
<input type="checkbox"/>	Maintain logs for cases, adverse events, infections, sterilization, equipment maintenance, emergency drills, medications, temperature checks, and quality review.	
<input type="checkbox"/>	Confirm templates capture consent, history, exam, anesthesia assessment, timeouts, monitoring, medications, implants, specimens, discharge criteria, and follow-up.	
<input type="checkbox"/>	Review HIPAA, OSHA, bloodborne pathogen, sharps, exposure, PPE, environmental cleaning, and waste management documentation.	
<input type="checkbox"/>	Document incident reporting, root cause review, corrective action, and leadership follow-up.	
<input type="checkbox"/>	Ensure policies match actual workflow and are reviewed on a scheduled cadence.	
<input type="checkbox"/>	Create centralized document control with version dates, owners, approvals, and update history.	

6. Quality, Compliance, and Opening Readiness

<input type="checkbox"/>	Checklist item	Notes / owner
<input type="checkbox"/>	Create a quality assurance process for outcomes, complications, transfers, infections, cancellations, documentation issues, and patient complaints.	
<input type="checkbox"/>	Complete a mock readiness review before opening or expanding services.	
<input type="checkbox"/>	Confirm accreditation readiness if accreditation is required or strategically preferred.	
<input type="checkbox"/>	Review billing, coding, documentation, fee schedules, payer issues, and financial controls for the procedures offered.	
<input type="checkbox"/>	Create a go-live checklist covering staff training, equipment checks, emergency readiness, policy approval, credentialing, supply setup, and documentation testing.	
<input type="checkbox"/>	Document open issues, corrective actions, responsible parties, deadlines, and proof of completion.	
<input type="checkbox"/>	Schedule post-opening reviews at 30, 60, and 90 days to assess workflow, documentation, safety, staffing, and financial performance.	

Final Review and Action Plan

Priority	Gap / risk identified	Responsible party	Target date

Resource Use Note

This resource is provided for general business and compliance education only. It is not legal, medical, accounting, tax, financial, regulatory, accreditation, or clinical advice. Requirements vary by state, payer, specialty, facility type, accreditation body, and scope of services. Organizations should consult qualified legal, compliance, privacy, financial, clinical, accreditation, and professional advisors regarding their specific obligations and risk profile.