













Intercollegiate Green Theatre Checklist v2.0

Below is a list of recommendations to reduce the environmental impact of operating theatres. Interventions in the **green** rows can be implemented on the day without prior preparation and can be used as part of a daily pre-operative checklist. Interventions in the **white** rows are those requiring wider stakeholder engagement and planning and may be suitable for monthly review or to help identify areas for quality improvement projects. Relevant guidance and academic literature supporting this checklist is included in the Compendium of Evidence, available at this link:



Ar	aesthesia	
1	Limit Nitrous Oxide (N ₂ O) to specific cases where there is evidence of clinical benefit	
	Decommission manifolds and switch to N_2O cylinders at point of use (or repair pipe leaks if centralized delivery still used)	
2	Consider TIVA and ensure that all drug waste and giving sets are disposed of through the pharmaceutical waste stream	
3	If using inhalational anaesthesia: • use low-flow anaesthesia (via end-tidal anaesthetic gas control, if available)	
	Remove desflurane from formulary	
4	Reduce waste: • avoid unnecessary equipment and opt for reusables (e.g. laryngoscopes, body warmers, slide sheets, trays, soda lime canisters) • transfer single-use objects with the patient if still needed (e.g. facemasks, suction)	
	Review and rationalise pre-prepared single-use equipment packs and PPE requirements for standard procedures	
5	Minimise drug waste ("Don't open unless needed", pre-empt propofol use, titrate O2) and dispose in correct pharmaceutical waste stream	
	Use air instead of oxygen as the ventilator drive gas	
Pr	eparing for Surgery	
6	Evaluate PPE and sterile field requirements: rationalise use of non-sterile single-use gloves and PPE and opt for reusables when possible limit sterile field to necessary areas only	
	Ensure availability of reusable textiles, including theatre hats, sterile gowns, patient drapes, and trolley covers	
7	Reduce water and energy consumption: • 'rub don't scrub': after first water scrub of day, you can use alcohol rub for subsequent cases	
	Install automatic or pedal-controlled water taps	
8	Avoid clinically unnecessary interventions (e.g. antibiotics, urinary catheterisation, histology examinations)	
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