

## ANAESTHETIC RECORD



ANXX101918A Rev: Mar 30/10 Page: 1 of 4 PROPOSED PROCEDURE: ANAESTHETIC HISTORY DIAGNOSIS: PREVIOUS ANAESTHETIC: ADVERSE REACTIONS: **FAMILY HISTORY:** ☐ AWARENESS NEVER YES □ NOT SIGNIFICANT PROLONGED RECOVERY NAUSEA/VOMITING □ SIGNIFICANT DYSPNEA OTHER COMMENTS \_\_\_\_ PREVIOUS OPERATIONS LABORATORY RESULTS EKG: NORMAL ABNORMAL K + CHEST X-RAY \_\_\_ CREATININE \_\_\_\_\_ GFR \_\_\_\_ P.T.T. X+TYPE **REVIEW OF SYSTEMS** Normal/Healthy ACTIVITY LEVEL **ENDOCRINE** CARDIOVASCULAR COMMENTS NORMAL NORMAL NORMAL NORMAL SUBNORMAL ANGINA/CAD DIABETIC INFARCT DIET / ORAL GASTROINTESTINAL DATE..... INSULIN C. H. F. VALVULAR DISEASE NORMAL THYROID DISEASE OTHER
MUSCOSKELETAL HEPATITIS/JAUNDICE ARRHYTHMIA / PALPITATIONS OBESITY SYST. HYPERTENSION HIATUS HERNIA /GERD NORMAL PERIPH, ART, DISEASE ALCOHOL D/WK \_\_\_ **ARTHRITIS** MYOPATHY NEUROLOGIC OTHER ... OCC / MOD / HEAVY RESPIRATORY DRUG ABUSE NORMAL RENAL NORMAL SMOKER..... NORMAL **NEUROPATHY** ASTHMA REDUCED FUNCTION SEIZURES DIALYSIS: PD/ HAEMO COPD TIA RECENT URTI SHUNT/L+/R+ STROKE OTHER \_\_\_\_ NPO SINCE: ALLERGIES / SENSITIVITIES: NO YES TO: 
 PHYSICAL EXAMINATION
 TEETH

 SpO2
 B.P.
 PULSE
 RESP. RATE
 CAPS
 PHYSICAL EXAMINATION WT (KGS) \_\_\_\_\_ HT \_ ALERT ORIENTED ALERT DISORIENTED OTHER CONDITION RESP. C.V.S. C.N.S. AIRWAY NORMAL NORMAL NORMAL C-SPINE MOVEMENT NO UPPER TEETH NORMAL NO LOWER TEETH COMMENTS: RESTRICTED UNSTABLE INFORMED OF POSSIBLE DAMAGE TO TEETH T.M. JOINT INTUBATION ASSESSMENT MOUTH OPENING MALLAMPATI I II III IV 3 FINGERS T.M. DISTANCE \_ 3 4 A.S.A. RISK STATUS 1 2 5 E EASY DISCUSSED WITH PATIENT: YES NO DIFFICULT ANAESTHETIC PLAN: MONITOR ONLY 
SEDATION 
GENERAL 
REGIONAL 
PT PREFERENCE TRANSFUSION | LINES | VENTILATION | ICU | PCA | EPIDURAL | OTHER | DATE: SIGNATURE OF ANAESTHESIOLOGIST:

## Page: 2 of 4 ANAESTHETIC RECORD Cont'd PREMEDICATION: DATE: ASA RISK: \_\_\_\_\_ START: END: ALLERGIES: PROCEDURE: Antibiotic: ANAESTHESIOLOGIST: SURGEON: PRE-INDUCTION CHECK LIST DRUGS DOSE consent consent machine / scavenger suction ☐ NPO since ..... blood available O2 cylinder ANAESTHETIC TECHNIQUE ☐ GA Regional ☐ Spinal ☐ Neurolept ☐ Epidural ☐ IV (Bier) block MAC Other Position ..... Catheter Depth\_\_\_\_\_ Needle Paresthesia Interspace Blood / CSF LOR AIR SALINE Other Difficult MONITORING ☐ EKG☐ 3L ☐ 5L ☐ SpO2 ☐ BP cuff ☐ EtCO2 ☐ Paw ☐ Stethoscope ☐ EtCO2 O2 Analyzer O2 / N2O/AIR L/min ☐ Foley Catheter Vapour (%) ET% ☐ Fluid Warmer ☐ Body Warmer TIME ☐ Insitu L R PERIPHERAL IV 220 Hand Forearm Size .... 200 POSITIONING supine Trendelenburg L Arms: 180 lithotomy at side Other □ prone □ lateral L R □ eyes taped □ lube □ shields R arm board 160 ☐ padded ☐ (HR) hip wedge 140 Head: □ pillow □ donut □ extended Legs\_ 120 **BREATHING SYSTEM** $_{\mathsf{BP}}\ ^{\mathsf{V}}$ 100 Circle O2 Delivery only nasal prongs Other ☐ hood ☐ mask 80 **VENTILATION** PCV VCV PS PEEP VT= mls RR= /min. I/E ratio Mean X 60 ☐ Spontaneous/assisted/manual ☐ Jet Ventilation 40 AIRWAY (write in size) Blood loss (mL) ..... mask only ..... amoured Urine (mL) ----- oral a/w # ..... RAE Fluids ..... nasal a/w # ..... std ETT #...... 2 lumen tube ...... cuff #..... LMA tracheostomy ECG Temperature (°C) INTUBATION O2 sat. (SpO2) ☐ direct ☐ blind End tidal (ETCO2) direct ☐ oral ☐ nasal L R asleep Airway pressure awake ☐ fiberoptic ☐ glidescope insitu CVP rapid sequence (RSI) blade size RR ☐ pre-oxygenation ☐ stylet used ☐ equal A/E ☐ laryngeal pressure (not RSI) FiO<sub>2</sub> Bis/Entropy no trauma easy mask ventilation **EVENTS/REMARKS** # of laryngoscopy attempts spray ☐ AWKWARD ☐ DIFFICULT ☐ EASY BEST VIEW AT LARYNGOSCOPY all of vocal cords pepiglottis only partial view of vocal cords no view of epiglottis arytenoids only Stylet required



## **ANAESTHETIC RECORD Cont'd**

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POST ANAESTHETIC CARE UNIT													
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