

Anesthesia Record:

Procedure: TAVR with TTE

Responsible Provider:

Providers:

Anesthesia Type: MAC

Age: 69 y.o.

Height: 1.753 m (5' 9")

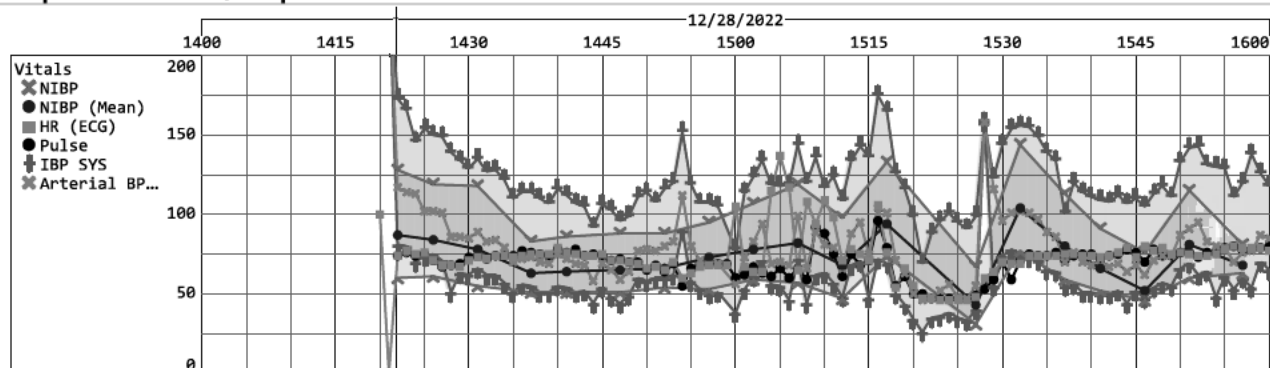
Weight: 107 kg (235 lb)

BMI: 34.7

NPO Status: 1430

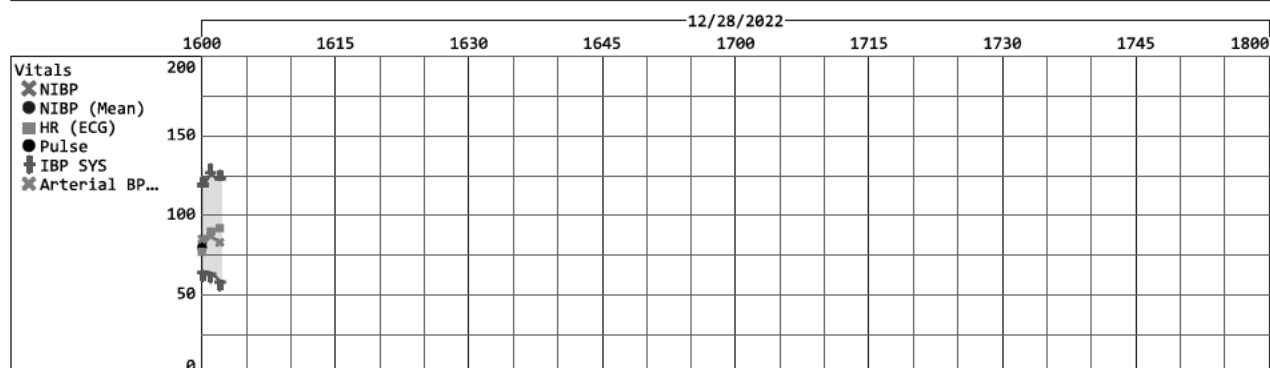
ASA Status: 4

Intraprocedure Grid/Graph



O2	(L/min)		[0]	[0]	[0]	[0]	[0]	[0]
N2O	(L/min)		[0]	[0]	[0]	[0]	[0]	[0]
Air	(L/min)		[0]	[0]	[0]	[0]	[0]	[0]
dexMED...	(mcg/kg/hr)		0.5			0		
prop...	(mcg/kg/min)		25		10	0		
midazolam 1 m...	(mg)	2						
fentaNYL cit...	(mcg)	50						
phenylep...	(mcg/min)				30	[50]	50	0
glycopyrrolat...	(mg)		0.2					
ceFAZolin (Anc...	(g)		2					
dexAMETHasone...	(mg)		4					
heparin (p...	(Units)				10000			
niCARDipine (...)	(mg)					0.2		
ondansetron 2...	(mg)		4					
protamine 10 ...	(mg)				50			
lactated R...	(mL/hr)	250						
Resp			[15]	[16]	[14]	[14]	[14]	[11]
MAC AA			[0]	[0]	[0]	[0]	[0]	[0]
ETCO2	(mmHg)		[19.5]	[19.8]	[17.9]	[13.4]	[40.6]	[39.4]
FiO2	(%)		[60]	[68.8]	[69]	[78.8]	[65.4]	[70.6]

SpO2	(%)		[100]	[100]	[100]	[100]	[100]	[100]
ECG			NSR					



normal.

Right AtriumCavity is normal.

IASThere is no evidence of shunting.

IVC/SVCThe inferior vena cava demonstrates a diameter of <=21 mm and collapses >50%.

Mitral ValveThe leaflets appear mildly thickened. There is trace regurgitation. There is no evidence of mitral valve stenosis.

Tricuspid ValveTricuspid valve structure is normal. There is trace regurgitation. There is no evidence of tricuspid valve stenosis. The right ventricular systolic pressure is upper limit of normal (30-35 mmHg).

Aortic ValveThe aortic valve is trileaflet. The leaflets exhibit severely reduced excursion. The leaflets appear severely calcified. There is trace regurgitation. There is severe stenosis (pk vel: 4 m/s, mn grad: 41 mmHg, area: 1.00 cm², VTI ratio: 0.25). This has worsened compared to the prior study.

Pulmonic ValvePulmonic valve structure is normal. There is trace regurgitation. There is no evidence of pulmonic valve stenosis.

AortaThe ascending aorta is borderline dilated.

PericardiumThere is no pericardial effusion.

Cath 11.25.22

Conclusion

- No obstructive coronary artery disease.
- LV end diastolic pressure is mildly elevated (16 mmHg).
- Severe,calcific aortic stenosis.

Anesthesia Preoperative Assessment

HPI:

is a 69 y.o. male scheduled for TAVR with TTE

Past Medical History:

Diagnosis	Date
• Allergic rhinitis	
• Anemia	
• Angina pectoris (CMS/HCC)	09/2021
• BPH (benign prostatic hyperplasia)	
• Coronary artery disease	
• COVID-19	07/2022
Treated w/ Paxlovid, no hospitalization required. All sx's fully resolved	
• COVID-19	12/13/2022
Asymptomatic- subsequent home testing per patient were all negative	
• Depression	
• ED (erectile dysfunction)	
• Heart murmur	
• History of lipoma	
• Hyperlipidemia	
• Hypertension	
• Nonrheumatic aortic (valve) stenosis	
• Peripheral neuropathy	
BLE	

- Psoriatic arthritis (CMS/HCC)
- Pulmonary hypertension (CMS/HCC)
- Spinal stenosis, lumbar region, with neurogenic claudication 02/2022

Past Surgical History:

Procedure	Laterality	Date
• ANGIOGRAM CORONARY ARTERY WITH LV & RIGHT HEART <i>Performed by [REDACTED] at [REDACTED]</i>	N/A	9/2/2021
• APPENDECTOMY		
• CATARACT EXTRACTION	Bilateral	
• CORONARY ANGIOGRAPHY W LEFT HEART CATH <i>Performed by [REDACTED]</i>	N/A	11/25/2022
• FORAMINOTOMY MINIMALLY INVASIVE OF CERVICAL SPINE W/ C-ARM		
• NECK SURGERY <i>growth removed</i>		11/2020
• SOFT TISSUE TUMOR RESECTION <i>benign tumor</i>		
• TONSILLECTOMY		

Allergies

Allergen	Reactions
• Penicillins	Rash and Hives

Prior to Admission medications

Medication	Sig	Start Date	End Date	Taking ?	Authorizing Provider
aspirin 81 mg tablet	Take 1 (one) tablet (81 mg total) by mouth daily.				Historical Provider, MD
atorvastatin (Lipitor) 40 mg tablet	Take 1 (one) tablet (40 mg total) by mouth daily.				Historical Provider, MD
escitalopram (Lexapro) 10 mg tablet	Take 1 (one) tablet (10 mg total) by mouth daily.	4/28/21			Historical Provider, MD
fluticasone propionate (Flonase) 50 mcg/actuation nasal spray	Administer 2 (two) sprays into each nostril 2 (two) times a day as needed for rhinitis or allergies.	3/23/20			Historical Provider, MD
folic acid (Folvite) 1 mg tablet	Take 1 (one) tablet (1 mg total) by mouth daily.	6/9/21			Historical Provider, MD
Humira, CF, Pen 40 mg/0.4 mL pen injector kit	1 Dose once a week. Sundays	8/24/21			Historical Provider, MD
hydroCHLORothiazide (Hydrodiuril) 25 mg tablet	Take 1 (one) tablet (25 mg total) by mouth daily.	7/5/21			Historical Provider, MD
lisinopril (Zestril) 40 mg tablet	Take 1 (one) tablet (40 mg total) by mouth daily.	7/10/21			Historical Provider, MD
methotrexate (Rheumatrex) 25 mg/mL injection	once a week. Sunday.	8/20/21			Historical Provider, MD
metoprolol succinate XL (Toprol-XL) 50 mg 24 hr tablet	Take 1 (one) tablet (50 mg total) by mouth daily.	7/5/21			Historical Provider, MD
montelukast (Singulair) 10 mg tablet	Take 1 (one) tablet (10 mg total) by mouth daily.	7/5/21			Historical Provider, MD
mupirocin (Bactroban) 2 % ointment	Apply 1 application topically to the nostrils two times per day starting 5 days prior to surgery	11/29/22			[REDACTED]
naproxen sodium (Aleve) 220 mg tablet	Take 1 (one) tablet (220 mg total) by mouth every 12 (twelve) hours as needed for mild pain.				Historical Provider, MD
nitroglycerin (Nitrostat) 0.4 mg	Place 1 (one) tablet (0.4	8/31/21	12/27/22		[REDACTED]

SL tablet	mg total) under the tongue every 5 (five) minutes as needed for chest pain.			
predniSONE (Deltasone) 1 mg tablet	Take 3 (three) tablets (3 mg total) by mouth daily.	8/20/21		Historical Provider, MD
tadalafil (Cialis) 5 mg tablet	Take 1 (one) tablet (5 mg total) by mouth daily as needed for erectile dysfunction.	7/1/21		Historical Provider, MD
atorvastatin (Lipitor) 20 mg tablet	daily.	7/1/21	12/27/22	Historical Provider, MD

Social History

Tobacco Use	
Smoking Status	Never
Smokeless Tobacco	Never

OB History

No obstetric history on file.

Labs:

Lab Results

Component	Value	Date/Time
WBC	7.6	12/13/2022 11:02 AM
HGB	13.7	12/13/2022 11:02 AM
HCT	39.2	12/13/2022 11:02 AM
PLT	235	12/13/2022 11:02 AM
INR	1.0	12/13/2022 11:02 AM
NA	138	12/13/2022 11:02 AM
K	4.2	12/13/2022 11:02 AM
BUN	37 (H)	12/13/2022 11:02 AM
CREATININE	1.0	12/13/2022 11:02 AM
GLUCOSE	122 (H)	12/13/2022 11:02 AM

No results found for: PREG TEST UR

BP 158/82 (BP Location: Left arm) | Pulse 76 | Temp 36 °C (96.8 °F) (Temporal) | Resp 16 | Ht 1.753 m (5' 9") | Wt 107 kg (235 lb) | SpO2 99% | BMI 34.70 kg/m²

Visit Vitals

Ht 1.753 m (5' 9")
Wt 108 kg (237 lb)

Body mass index is 35 kg/m².

Patient is obese.

Relevant Problems

CARDIO

- (+) Essential hypertension
- (+) Mild pulmonary hypertension (CMS/HCC)
- (+) Nonobstructive atherosclerosis of coronary artery
- (+) Nonrheumatic aortic valve stenosis
- (+) Severe aortic stenosis

Other

- (+) Inflammatory polyarthropathy (CMS/HCC)

Physical Exam

Airway

Mallampati: III
TM distance: <3 FB
Neck ROM: limited

Cardiovascular
(+) murmur

Dental

Pulmonary - normal exam

Abdominal - normal exam
Bowel sounds: decreased

Anesthesia Plan

ASA 4

MAC

intravenous induction

Postoperative administration of opioids is intended.

Anesthetic plans and procedure, alternative options, benefits and risks up to and including major disability and death were discussed with patient, who wish to proceed with the anesthesia plan. Use of blood products discussed with patient who consented to blood products.

Revision History

Date/Time	User	Provider Type	Action
> 12/28/2022 2:27 PM	[REDACTED]	Anesthesiologist	Addend
12/28/2022 1:53 PM		Anesthesiologist	Addend
12/27/2022 5:00 PM		Anesthesiologist	Sign

Postprocedure Note

Last edited 12/28/22 1755 by [REDACTED] MD

Date of Service 12/28/22 1754

Status: Signed

Patient [REDACTED]

Procedure Summary

Date: 12/28/22
Anesthesia Start: 1414
Procedure: TAVR with TTE

Providers: [REDACTED]
Anesthesia Type: MAC

Room / Location: [REDACTED]
Anesthesia Stop: 1614
Diagnosis:
Severe aortic stenosis
(Severe aortic stenosis [I35.0])
Responsible Provider: [REDACTED]
ASA Status: 4

Anesthesia Type: MAC

Vitals

Vitals	Value	Taken Time
BP	113/69	12/28/22 1730
Temp	36.2 °C (97.2 °F)	12/28/22 1730
Pulse	76	12/28/22 1741
Resp	17	12/28/22 1740
SpO2	96 %	12/28/22 1741

Vitals shown include unvalidated device data.

Patient location during evaluation: bedside

Patient participation: complete - patient participated

Level of consciousness: awake

Pain management: adequate

Airway patency: patent

Anesthetic complications: **no**

Cardiovascular status: acceptable

Respiratory status: acceptable

Hydration status: acceptable

Call Slot: B05

Encounter Notes

All notes

Anesthesia Preprocedure Evaluation (1)

12/27/2022 4:52 PM (Anesthesiology)

Anesthesia Postprocedure Evaluation (1)

12/28/2022 5:54 PM (Anesthesiology)

Anesthesia Procedure Notes (1)

12/28/2022 2:30 PM Arterial Line from (Anesthesiology)

Additional Documentation

Flowsheets: Vital Validation, Positioning, Assess, Anesthesia Checklist, Lines/Drains/Airways

Other Labs

(Last 90 days)

	06/03 1857
Bilirubin Total	0.3
ALT	129 ^
AST	130 ^
ALK PHOS	74

Electrolyte Labs

(Last 90 days)

	06/03 1857
Na	138
Cl	97
BUN	26 ^

Chemistry Labs

(Last 90 days)

	06/03 1857
Na	138
K	3.7
Ca	8.9
Cl	97
CO2	17 v
BUN	26 ^
CREAT	1.1
GLUC	165 ^

Coagulation Labs

(Last 90 days)

	06/03 1901
PT	15.0 ^
INR	1.2

Hematology Labs

(Last 90 days)

	06/03 1857
Hematocrit	42.7
Hemoglobin	14.2
MCV	110.6 ^

Notable Events

None

Home Medications

Within last 14 days from 12/28/22

		Last Taken	Last Updated
atorvastatin (Lipitor) 40 mg tablet	Take 1 (one) tablet (40 mg total) by mouth daily.	12/28/2022	12/28/22 1241
escitalopram (Lexapro) 10 mg tablet	Take 1 (one) tablet (10 mg total) by mouth daily.	12/28/2022	12/28/22 1241
fluticasone propionate (Flonase) 50 mcg/actuation nasal spray	Administer 2 (two) sprays into each nostril 2 (two) times a day as needed for rhinitis or allergies.	12/28/2022	12/28/22 1241
montelukast (Singulair) 10 mg tablet	Take 1 (one) tablet (10 mg total) by mouth daily.	12/28/2022	12/28/22 1241
aspirin 81 mg tablet	Take 1 (one) tablet (81 mg total) by mouth daily.	12/28/2022	12/28/22 1241
atorvastatin (Lipitor) 20 mg tablet (Discontinued)	daily.	Taking	11/29/22 1529
folic acid (Folvite) 1 mg tablet	Take 1 (one) tablet (1 mg total) by mouth daily.	12/28/2022	12/28/22 1241
Humira,CF, Pen 40 mg/0.4 mL pen injector kit	1 Dose once a week. Sundays	12/25/2022	12/27/22 1109
hydroCHLORothiazide (Hydrodiuril) 25 mg tablet	Take 1 (one) tablet (25 mg total) by mouth daily.	12/27/2022	12/28/22 1241
lisinopril (Zestril) 40 mg tablet	Take 1 (one) tablet (40 mg total) by mouth daily.	12/27/2022	12/28/22 1241
methotrexate (Rheumatrex) 25 mg/mL injection	once a week. Sunday.	12/25/2022	12/27/22 1109
metoprolol succinate XL (Toprol-XL) 50 mg 24 hr tablet	Take 1 (one) tablet (50 mg total) by mouth daily.	12/28/2022	12/28/22 1241
mupirocin (Bactroban) 2 % ointment	Apply 1 application topically to the nostrils two times per day starting 5 days prior to surgery	12/28/2022	12/28/22 1241
naproxen sodium (Aleve) 220 mg tablet	Take 1 (one) tablet (220 mg total) by mouth every 12 (twelve) hours as needed for mild pain.	12/27/2022	12/27/22 1109
nitroglycerin (Nitrostat) 0.4 mg SL tablet	Place 1 (one) tablet (0.4 mg total) under the tongue every 5 (five) minutes as needed for chest pain.	Taking	11/29/22 1529
prednisONE (Deltasone) 1 mg tablet	Take 3 (three) tablets (3 mg total) by mouth daily.	12/28/2022	12/28/22 1241
tadalafil (Cialis) 5 mg tablet	Take 1 (one) tablet (5 mg total) by mouth daily as needed for erectile dysfunction.	Not Taking	12/27/22 1109

Medications

glycopyrrolate 0.2 mg/mL	0.2 mg
ondansetron 2 mg/mL	4 mg
dexAMETHasone 4 mg/mL	4 mg
protamine 10 mg/mL	50 mg
heparin (porcine) 1,000 unit/mL	10,000 Units
fentaNYL citrate (PF) 50 mcg/mL	50 mcg
midazolam 1 mg/mL	2 mg
ceFAZolin (Ancef) injection 2,000 mg	2 g
dexMEDEtomidine (Precedex®) 400 mcg in NaCl 0.9 % 100 mL (4 mcg/mL) infusion (Pre-Compounded)	45.83 mcg
phenylephrine (Neo-Synephrine) 20 mg in sodium chloride 0.9 % 250 mL (0.08 mg/mL) infusion	1,500 mcg
propofol (Diprivan) injection	107.8 mg
niCARDipine (Cardene®) 40 mg in NaCl 0.9 % 200 mL (0.2 mg/mL) infusion (premix)	0.2 mg
lactated Ringer's infusion	0 mL

Pediatric Induction Behavioral Assessment

Blood Products

None

Intraprocedure I/O Totals

None

Responsible Staff

12/28/22

Name	Role	Begin	End
	ANESTH	1414	1614

Preprocedure Signoff

Ready for Procedure: on 12/28/22 at 1353

Reviewed: on 12/28/22 at 1353

Events

12/28/2022	
1353	Ready for Procedure
1414	Anesthesia Start
1417	Patient in Room
1417	Start Data Collection
1424	Induction
1424	Anesthesia Ready
1438	Procedure Start
1547	Q Note
1551	Procedure Finish
1602	Stop Data Collection
1603	Patient Out of Room
1614	Handoff to Receiving Nurse
1614	Anesthesia Stop

Lines, Drains, and Airways

Type	Placement	Removal
Wound	02/16/22 0000	08/03/23 1719 by
Peripheral IV	12/28/22 1328	12/29/22 1128 by
Arterial Line	12/28/22 1410	12/28/22 1524 by
Arterial Sheath	12/28/22 1443	12/28/22 1522 by
Arterial Sheath	12/28/22 1451	12/28/22 1523 by
Venous Sheath	12/28/22 1451	12/28/22 1549 by
Venous Sheath	12/28/22 1541	12/29/22 1128 by

Assessments

	12/28/2022	12/28/2022
	1414	1602
EKG:	NSR	OFF

Checklist

Flowsheet Row	Most Recent Value
Checklist	Anesthesia apparatus checked, Patient confirmed identity, Reviewed allergies, Patient confirmed procedure, site and consent, Reviewed airway and blood loss risk
Ancillary Equipment	Eye protection
NIBP Site	Arm R
Cardiac	ECG
ECG Leads	5

Positioning

	12/28/2022 1424
Position:	Supine
Supporting Devices:	Pillow
Positioning Checklist:	Pressure points checked;Pressure points padded;Eyes/Ears checked

Allergies

Current as of 12/28/22 1353

Penicillins

Preprocedure Vitals

Current as of 12/28/22 1353

BP: 158/82
Pulse: 76
Resp: 16
SpO2: 99
Temp: 36 °C (96.8 °F)
Height: 1.753 m (5' 9") (12/28/22)
Weight: 107 kg (235 lb) (12/28/22)
BMI: **34.7**
IBW: 70.7 kg (155 lb 15.1 oz)
Last edited 12/28/22 1231 by KS