

Anesthesia Record

Patient ID Label

Procedure Information

Date of service _____ Facility _____ Room # _____

Physician _____ CRNA _____

Procedure _____

☐ General ☐ Regional ☐ MAC NPO at _____

First Name _____ Last Name _____ Weight _____

Allergies _____

Notes _____

Cardiovascular

☐ WNL ☐ HTN ☐ Angina ☐ PTCA/Stent ☐ CAD ☐ MI ☐ CABG. ☐ HLD ☐ PVD ☐ Afib ☐ CHF

EKG _____ Exam of Heart ☐ Normal ☐ Irregular ☐ Murmur Is patient on beta-blockers? ☐ No ☐ Yes

If patient is on beta-blockers

☐ Patient will get beta-blockers intra-OP ☐ beta-blockers contraindicated ☐ Date/time last beta-blocker taken _____

Pulmonary

☐ WNL ☐ COPD ☐ Asthma ☐ Pneumonia ☐ OSA ☐ Bronchitis Smoker? ☐ No ☐ Yes Frequency _____

Exam of Lungs ☐ CTA ☐ Other _____

Central Nervous System

☐ WNL ☐ CVA ☐ Seizure ☐ Dementia ☐ ETOH ☐ Migranes ☐ Drug Abuse ☐ Anxiety and Depression ☐ Other _____

Gastro-Intestinal

☐ WNL ☐ GERD ☐ Hepatitis ☐ Hiatal Hernia ☐ Diverticulosis ☐ Other _____

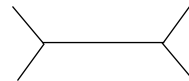
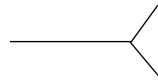
Renal

☐ WNL ☐ CKD ☐ BPH ☐ ESRD ☐ Other _____

Endocrine

☐ WNL ☐ Diabetes ☐ Obesity ☐ Hyper/Hypo Thyroid ☐ Other _____

Airway: MP ☐ 1 ☐ 2 ☐ 3 ☐ 4 **Dentition** ☐ Intact ☐ Loose _____ ☐ Bridge _____ ☐ Cap _____



ASA ☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5 ☐ E Pre-Op Signature _____ Date _____ Time _____

Anesthesia Start Time _____ **Procedure Start Time** _____

☐ Nasal Cannula w/ ETCO2 ☐ Pre - Oxygenation ☐ Oral Airway ☐ Nasal Airway ☐ Trach ☐ Oral/Nasal ☐ Cuff ☐ Rapid Sequence

☐ Mask Easy ☐ Mask Hard ☐ Intubation Easy ☐ Intubation Hard ☐ LMA # _____ ☐ Mac _____ ☐ Mil _____ ☐ Bill Breath Sounds

ETT Size _____ Ett-Attempts ☐ 1 ☐ 2 ☐ 3 View-Attempts ☐ 1 ☐ 2 ☐ 3 ☐ 4 Taped at _____ EtCO2 _____

Anesthesia End Time _____ **Procedure End Time** _____

Post Op DX _____

Post Anesthesia Care/Vitals

Patient temperature on arrival to PACU greater than or equal to 86C/96.8 F? ☐ Yes ☐ No

☐ No Apparent Complications ☐ Stable ☐ Report given to responsible practitioner

RR _____ SpO2 _____ HR _____ BP _____ Temp _____

☐ Airway Patient rate and oxygenation within expected parameters ☐ Temperature and pain level within expected parameters

☐ Pulse and BP within expected parameter ☐ Arouseable and able to follow comands ☐ Appears adequately hydrated

☐ No acute nausea or vomiting

Pre-Op Signature _____ Date _____ Time _____

Surgeon Signature _____ Date _____