

DATE/TIME: 12/10/2014 / 08:04 pm

IMMEDIATE PRE-INDUCTION ASSESSMENT

Anesthesia Machine, Suction, Laryngoscope checked Y/N

Clinical Condition Re-assessed: Y/N

Investigations Noted: Y/N

Consent Checked: Y/N

NPO Status Confirmed: Y/N

HR: 110/min RR: 24/min

BP: 110/70 mmHg SpO₂: 100%**TECHNIQUE**

GA TIVA / RA (SAB - EA - CSE) - PNB - IVS - MAC

LINES

Peripheral Lines: G (Right / Left:)

G (Right / Left:)

CVP Line: 7 Fr. 3 Lumen (Right / Left: femoral)

Arterial Line: 6 Fr. Right / Left: femoral

MONITOR

Pulse Oximeter / ECG / NIBP-IBP /

Capnography / CVP / Urine Output / Airway Pr /

Temp / PNS / Gas-Vapor Analyzer / BIS

INDUCTION

Intravenous / Inhalational / RSI / Awake FOB

Preoxygenation: Y / N

Airway: Mask / LMA (Classic/I-Gel) / ETT / DLT / Tracheostomy

Size: Cuffed / Uncuffed

Route: Oral / Nasal

Type: PVC / Flexometallic / RAE (S / N)

CL Grade: Difficulty: Y / N

Aid Used: Y / N (Stylet / Bougie / Intubating LMA / VDL / FOB)

ETT Secured At: Cuff Pr: cmH₂OConfirmation: Bilateral Auscultation / ETCO₂ / FOB

Throat Pack: Y / N Ryles Tube (OG / NG):

VENTILATION

Circuit: Circles / JR / Bains

Ventilation: Spontaneous / Controlled / Assisted

Mode: CMV / PCV / SIMV

Settings: TV: 450 ml, RR: 24 /min,

Insp Pr: cmH₂O,I:E Ratio: 1:2 PEEP: 5 cmH₂O**MAINTENANCE**O₂ lit / min by NP / Mask / TracheostomyO₂: Air: N₂O:

FGF: Lit/min

REVERSAL OF NEUROMUSCULAR BLOCKAGE**EXTUBATION OF TRACHEA**

Throat Pack Removed: Y/N Good Muscle Tone and Power: Y/N

Through OP Suction: Y/N Adequate Reversal of NMB: Y/N

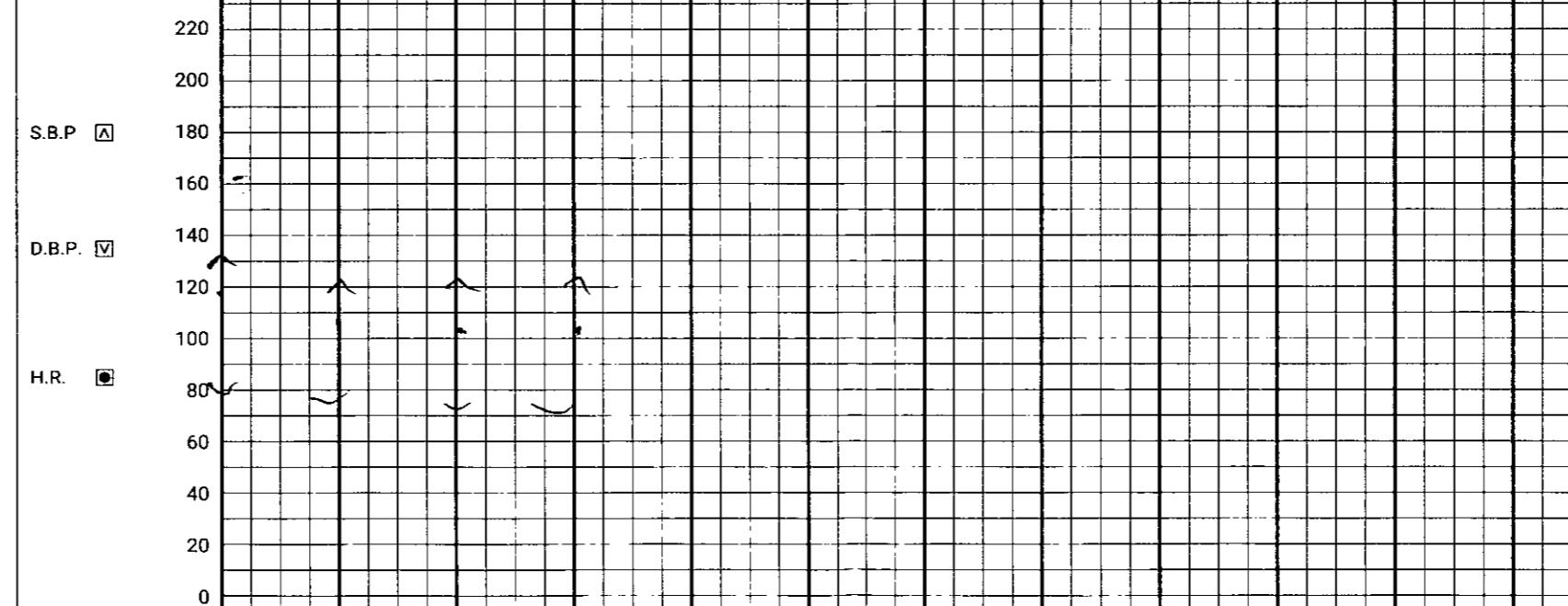
Anesthesiologist: Dr. Anushka Mallie	Pt Shift In: 8 pm Induction: 8:10 pm	DVT Prophylaxis: How/How pump
Surgeon: Dr. R.S. Acharya	Incision: 8:10 pm Closure: 8:30 pm Shift Out: 8:45 pm	Eyes, Pressure Points Padded: Y N
Anesthesia Technician: Mr. Jayaram OT No: T	Position: Supine	Tourniquet: Site: _____
Surgery: Traehtomy	Warming: Blanket / Air / In-line Fluid Warmer	Inflation: Deflation: Duration: 1 min

TIME: AM/PM	8	8:15	8:20	8:25
	pm	pm	pm	pm

DRUGS:
 iv midazolam infusion → in
 iv fentanyl 200mcg
 iv Atropine 20mcg 20mcg

IV FLUIDS: *Nabilyle* →

ECG: Sinus rhythm with atrial fibrillation
 SpO₂ (%): 100% 100% 100% 100%
 ETCO₂ (mmHg): 34 34 34 34
 CVP (cmH₂O):
 TEMP (°C):
 BIS: MA
 BLOOD LOSS (ml): minimal
 URINE OUTPUT (ml): minimal



EVENTS: uneventful.

Induction (ind) Reversal (rev) Incision (inc) Closure (cls)

REGIONAL ANESTHESIA

Preparation: Aseptic Local: _____

SUBARACHNOID BLOCK

Position: _____ Space: _____ interspace

Needle: Cutting/Pencil point: G

Approach: Median/Paramedian

Confirmation: Free and Clear CSF Flow

Attempts: _____

Drugs: _____ Heavy % _____ ml

Adjunct:

Level Achieved:

Post op Level:

EPIDURAL / COMBINED SPINAL EPIDURAL BLOCK

Position: _____ Space: _____ interspace

Tuohy Needle: G Technique: Intermittent/Continuous

End Point: LOR to Saline / Air At _____ cm Mark

Confirmation: Negative aspiration of blood and CSF

Attempt: _____

Fixation:

Spinal Needle: _____ G

Spinal Drug: _____ Heavy % _____ ml

Epidural test dose:

Epidural Activation:

PERIPHERAL NERVE BLOCK

Indication: Surgical / Postoperative Analgesia

Preparation: Aseptic

Position: _____

Site (Right / Left): _____

Needle: _____

Guidance: Landmark / PNS / Ultrasound

Depth: _____ cm, Min. Cur: _____ mA, Motor Resp: _____

Pain / Resistance on injection: Y/N

Negative Blood Aspiration:

Drugs: _____ % _____ ml

Adjuncts: _____ Total: _____

INPUT	OUTPUT
Crystallloid: Nabilyle	Urine: Stool
Colloid: _____	Bloodloss: minimal
Blood / Bl. Products: JMA	_____

POST OPERATIVE ANALGESIA

8 mg/kg
 Anesthesiologist Signature: Date: 12/10/2014 Time: 8:15 pm