

Procedure Notes:

- parts prepared & draped under aseptic precautions
- femoral vein cannulated using Seldinger's technique
- confirmed & ultrasound,

Complications Yes (NO) If yes, please describe

SIGN OUT CHECKLIST

The following have been verified			Time:
Name of the procedure recorded verified	Yes.	Signature of Doctor	10:45
Any significant intra operative finding		Signature of Nurse	10:15
Instrument count/ sponge count/ needles etc verified			
Labelling of specimens, if any			
Any equipment problems to be addressed			

Condition at transfer/ discharge (Select the appropriate option) Stable Critical

Disposition (Select the appropriate option) Home Patient Room ICU Disposition Time:

Post Procedure Instructions:

- Backflow confirmed
- And CBC - stat

Doctors Name	Dr Sumathy	Signature	✓	Date/ time
Nurse Handed over to	Anu N/933	Signature	✓	Date/ time
Nurse Handed over from	BH Wijay	Signature	✓	Date/ time