Veterans' Administration Medical Center **1700 S. Lincoln Avenue** **Lebanon, PA 17042**

ANESTHESIA RECORD

Procedure(s)

Date | OR # | Page of | Surgeon(s)

	START	STOP
Anesthesia		
Procedure		

Room Time IN: OUT:

PRE-PROCEDURE

Pt Identifiec ☐ ID Band ☐ Questioned ☐ Guardian
☐ Chart reviewed ☐ Permit signed
☐ NPO since _____ ☐ Full stomach
☐ Patient reassessed prior to anesthesia & surgery; surgical site verified - Ready to proceed
☐ Peri-operative pain management discussed with patient / guardian, plan of care completed

Pre-Anesthetic state:
☐ Awake ☐ Anxious ☐ Uncooperative
☐ Calm ☐ Sedated ☐ Reduced LOC

PATIENT SAFETY

☐ Anesthesia machine # _____ checked
☐ Critical clinical alarms checked & activated
☐ Secured with safety belt ☐ Axillary roll
☐ Arm(s) secured on armboards: L R
☐ Arm(s) tucked: L R ☐ Arms < 90°
☐ Pressure points checked, padded, monitored
☐ Eye Care: ☐ Taped closed ☐ Ointment
☐ By surgeon ☐ Saline ☐ Goggles
☐ Prone - no pressure on orbits/nose/ears/genitals

MONITORS AND EQUIPMENT

Steth: ☐ Esophageal ☐ Precordial ☐ Suprasternal
☐ Non-Invasive B/P ☐ V lead ECG
☐ Continuous ECG ☐ ST / Dysrhy. analysis
☐ Pulse oximeter ☐ Nerve stimulator:
☐ End tidal $C0_2$ ☐ Ulnar ☐ Tibial
☐ Oxygen / $Fi0_2$ monitor ☐ Facial ☐ _____
☐ ET agent analyzer ☐ Fluid / Blood warmer
☐ Temp:_____ ☐ Processed EEG
☐ Airway humidifier ☐ Cell saver ☐ ICP
☐ Body Warmer ☐ CPB ☐ TEE
☐ upper ☐ lower ☐ Evoked potential:
☐ NG / OG tube _____
Foley: ☐ OR ☐ Ward ☐ Doppler:_____
☐ Arterial line _____
☐ C-line/CVP
☐ PA line _____
☐ IV(s) _____

ANESTHETIC TECHNIQUE

GA Induction: ☐ Intravenous ☐ Pre-0_2 ☐ RSI
☐ Cricoid pressure ☐ Inhalation ☐ IM ☐ PR
GA Maintenance: ☐ Inhalation ☐ Inhalation / IV
☐ GA / Regional combination ☐ TIVA
☐ Sedation & Analgesia / Monitored Anesthesia Care
Regional: Epidural - ☐ Thoracic ☐ Lumbar ☐ Caudal
☐ SAB ☐ Ankle ☐ Femoral ☐ Axillary ☐ Interscalene
☐ CSE ☐ Bier ☐ Continuous Spinal ☐ Cervical Plexus
☐ Other:

Regional Technique: ☐ Position _____
☐ See remarks ☐ Prep _____
☐ Local _____ ☐ Site _____
☐ Needle _____ ☐ Introducer
☐ LA _____
☐ Narcotic _____
☐ Additive _____
☐ Test dose Rx _____
☐ Attempts x _____ Level _____
☐ Catheter: ☐ Test dose response: + −
L.O.R. _____ cm Skin _____ cm ☐ Secured

LOR	Heme	CSF	Pares
A	+	+	+
S	I	I	I

AIRWAY MANAGEMENT

☐ Oral ETT ☐ RAE ☐ L.T.A. ☐ Magill forceps
☐ Nasal ETT ☐ LMA # _____
☐ Stylet ☐ Classic/Unique ☐ Fastrach ☐ ProSeal
☐ DL ☐ Flexible ☐ Other: _____
☐ Tube size: _____ ☐ FOI ☐ Awake
☐ Blade: _____ ☐ Laser ETT ☐ LIS
☐ Attempts x _____ ☐ EMG ETT ☐ Bougie
☐ Grade: I II III IV blind ☐ Armored ETT ☐ TTJV
☐ Atraumatic intubation/LMA ☐ DLT_____
☐ Secured at _____ cm ☐ Bronchial blocker system
☐ ET $C0_2$ present _____
☐ Breath sounds = bilateral ☐ Rigid FO laryngoscope
☐ Cuffed - min occ pressure _____
☐ Uncuffed ETT - leaks at _____ cm H20 ☐ Nerve blocks / Topical / Nebulizer - See Remarks
☐ Oral airway ☐ Nasal airway ☐ Bite block Two handed / person
Mask vent: ☐ Easy ☐ Head-tilt ☐ Max jaw-thrust
Circuit: ☐ Circle system ☐ NRB ☐ Bain
☐ Mask case ☐ Via tracheotomy / stoma
☐ Nasal cannula ☐ Simple 0_2 mask ☐ _____

TIME:

AGENTS

	TOTALS
☐ Des ☐ Iso ☐ Sev ☐ Hal (ET%)	
☐ N_20 ☐ Air (L/min)	
Oxygen (L/min)	
Midazolam (MG)	
Fentanyl (MCG)	
☐ Morphine ☐ Hydromorphone (MG)	
☐ Propofol ☐ Etomidate (MG)	
☐ Rocuronium ☐ Vecuronium (MG)	
Succinylcholine (MG)	
( )	
( )	
( )	

FLUIDS

OUTPUT

Urine (ml)
EBL (ml)
Gastric (ml)

MONITORS

ECG
% Oxygen Inspired ($Fi0_2$)
0_2 Saturation ($Sa0_2$)
End Tidal $C0_2$
Temp: ☐ C ☐ F
Train of four

PERI-OP MEDS | **TIME**

Pre-procedure Vital Signs

Pulse | Resp
BP
Temp | $Sa0_2$

200 180 160 140 120 100 80 60 40 20

180 150 120 100 80 50

100

180 150 120 100 80 50

100

SYMBOLS

B/P CUFF PRESSURE
ARTERIAL LINE
X MEAN ARTERIAL PRESSURE
PULSE
VENTILATION
O / SV
SPONTANEOUS / AV
ASSISTED / CV
CONTROLLED

TOURNIQUET
LOCATION:
mmHg:
UP:
DOWN:
TOTAL TIME:

VENT

Tidal Volume (ml)
Respiratory Rate (bpm)
Peak Pressure (cm H_20)
☐ PEEP ☐ CPAP (cm H_20)

Symbols for Remarks
Position

PROVIDER(S)

Patient Identification (*Addressograph Card*)

Remarks:

POST ANESTHESIA CARE NOTES

Location | Time
B/P | 0_2 Sat %
Pulse | Resp | Temp

☐ Awake ☐ Somnolent ☐ Unarousable ☐ Stable ☐ Unstable
☐ Supplemental Oxygen ☐ OPA / NPA ☐ LMA ☐ Intubated

☐ Pain care plan discussed with RN
☐ Regional - dermatome level:
☐ Continuous epidural analgesia
☐ Recovery recorded on anes. form
☐ Direct admit to hospital ward, Aldrete score _____
☐ No intra-operative anesthesia adverse events noted

Antibiotic:
Dose:
Time
IV Route

Controlled Drugs

Drug Name	Used	Wasted

Provider | Witness

ANESTHESIA
Medical Record
OPTIONAL FORM 517 (7-95)
Prescribed by GSA/ICMR,
FPMR (41 CFR) 101-11.203(b)(10)

MRC approved 01/13/10 595-023

History from: ☐ Patient ☐ Parent / Guardian ☐ Significant Other ☐ Chart ☐ Poor Historian ☐ Language Barrier

PRE-ANESTHESIA EVALUATION

☐ See previous anesthesia record dated _____ for information

PROPOSED PROCEDURE	AGE	SEX ☐ M ☐ F	HEIGHT in / cm	WEIGHT lb / kg

PREVIOUS ANESTHESIA / OPERATIONS / COMPLICATIONS ☐ NONE

CURRENT MEDICATION(S) ☐ NONE ☐ Hx Herbal / OTC drug use ☐ Hx Illicit drug use

AIRWAY
☐ MP1 ☐ MP2 ☐ MP3 ☐ MP4
☐ T-M distance = _____
☐ M-O distance = _____
Neck ROM FULL LIMITED NONE
☐ Morbid obesity ☐ Hx difficult airway ☐ Teeth poor repair / loose ☐ Micrognathia
☐ Edentulous ↑ ↓ ☐ Facial hair ☐ Short muscular neck ☐ Prominent incisors

ALLERGIES / REACTION ☐ NONE

SYSTEM

☐ WNL RESPIRATORY

Asthma / RAD	Recurrent tonsillitis
Bronchiolitis	Recurrent OM
COPD	Recent URI
Emphysema	TB / +PPD
Bronchitis	Pneumonia
Respiratory failure	Productive cough
Pleural effusion	SOB / Dyspnea
Pulmonary embolism	OSA
Sinusitis / Rhinitis	Orthopnea
Environ. allergies	Wheezing

☐ WNL CARDIOVASCULAR

Hypertension	Abnormal ECG
Hyperlipoproteinemia	Cardiomyopathy
CAD	Hypovolemia
Angina	Pacemaker
Stable / Unstable	AICD
Myocardial infarction	Murmur
CHF DOE PND	Valvular Dz / MVP
Peripheral Vascular Dz	Hx Rheumatic fever
Exercise Tolerance	Endocarditis
METs: > 4 < 4	Aneurysm

☐ WNL HEPATO / GASTROINTESTINAL

Obesity	N & V
Cirrhosis / Liver Dz	Diarrhea
Hepatitis / Jaundice	IBS / Chrohn's Dz
Bowel obstruction	Pancreatitis
Ulcers	Gallbladder Dz
Hiatal hernia	Diverticulum
GERD	Colon polyps

☐ WNL NEURO / MUSCULOSKELETAL

Arthritis / DJD / DDD	Muscle weakness
OA / RA / Gout	Neuromuscular Dz
Back Problems (LBP)	Paralysis
Scoliosis / Kyphosis	Paresthesia(s)
Headaches / Migraine	CVA / TIA
↑ ICP / Head injury	Seizures / Epilepsy
↓ LOC / Unconscious	Psychiatric disorder

☐ WNL RENAL / ENDOCRINE

Thyroid disease	Prostate
Bladder Dz / tumor	BPH / CA
Renal stones	UTI / Incontinence
Renal insufficiency	Diabetes mellitus:
Renal Failure / Dialysis	Type I / II / Gest.
Adrenocortical insuff.	Pituitary disorder

☐ WNL OTHER

Anemia	Immunosuppressed
Bleeding disorder	Sickle Cell Dz / Trait
Cancer	Steroid use
Chemotherapy	Cushingoid
Radiation Tx	Sepsis / Infection
Nonambulatory	Transfusion Hx
Eye Dz / Glaucoma	Weight loss / gain
HIV / AIDS	Pregnant
G6PD Deficiency	Peripheral edema

COMMENTS

TOBACCO USE: ☐ No ☐ Yes _____ Packs / Day for _____ Years ☐ Quit _____

Pre-procedure Pulmonary Physical Exam:

Pre-procedure Cardiac Physical Exam:

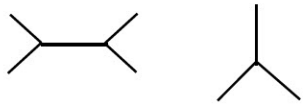
ETHANOL USE: ☐ No ☐ Yes Frequency _____ ☐ Hx ETOH abuse ☐ Quit _____

FAMILIAL ANES PROBLEMS: ☐ No ☐ Yes Description _____

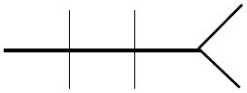
DIAGNOSTIC STUDIES

ECG:

LABORATORY STUDIES



T&S / T&C:



♀ HCG: LMP:

U/A:

For >24 hour admits:
☐ No adverse anesthesia related complications noted, satisfactory progress and recovery
☐ See progress notes for anesthesia related concerns

SURGICAL DIAGNOSIS / PROBLEM LIST

PHYSICAL STATUS: 1 2 3 4 5 E

PROVIDER | DATE | TIME

CONTROLLED MEDICATIONS

MEDICATION	USED	DESTROYED	RETURNED

PLANNED ANESTHESIA
☐ GA ☐ Epidural ☐ Cont Spinal
☐ Local / MAC ☐ Caudal ☐ CSE
☐ Deep Sedation ☐ SAB ☐ Regional:

Special Monitors / Airway / Concerns:

PROVIDER | WITNESS

PRE-ANESTHESIA DIRECTIONS / MEDICATIONS

☐ NPO per ASA Guidelines

EVALUATOR / DATE:

EVALUATOR / DATE:

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