ANESTHESIA RECORD

Procedure

Date | OR No. | Page of | Surgeon(s)

	START	STOP
Anesthesia		
Procedure		

PRE-PROCEDURE

☐ Identfied: ☐ ID Band ☐ Questioning
☐ Chart Reviewed ☐ Permit Signed
☐ NPO Since _____
Pre-Anesthetic State: ☐ Calm
☐ Awake ☐ Asleep
☐ Apprehensive ☐ Confused
☐ Uncooperative ☐ Unresponsive

PATIENT SAFETY

☐ Anes. Machine #_____ Checked
☐ Safety Belt On ☐ Axillary Roll
☐ Armboard Restraints ☐ Arms Tucked
☐ Pressure Points Checked and Padded
☐ **Eye Care:** ☐ Ointment ☐ Saline
☐ Taped ☐ Pads ☐ Goggles

MONITORS AND EQUIPMENT

☐ Steth: ☐ Precord ☐ Esoph ☐ Other
☐ Non-Invasive B/P: ☐ Left ☐ Right
☐ Continuous EKG ☐ V Lead EKG
☐ Pulse Oximeter ☐ Oxygen Sensor
☐ End Tidal CO_2 ☐ Gas Analyzer
☐ Temp. _____ ☐ Nerve Simulator
☐ Warming Blanket ☐ EEG ☐ Doppler
☐ Airway Humidifier ☐ Fluid Warmer
☐ NG / OG Tube ☐ Foley Catheter
☐ Art. Line _____
☐ CVP _____
☐ PA Line _____
☐ IV(s) _____
☐ _____

ANESTHETIC TECHNIQUE

General: ☐ Pre-Oxygenation ☐ LTA
☐ Rapid Sequence ☐ Cricoid Pressure
☐ Intravenous ☐ Inhalation
☐ Intramuscular ☐ Rectal
Regional: ☐ Spinal ☐ Epidural
☐ Axillary ☐ Bier Block ☐ Ankle Block
☐ _____ ☐ Position _____
☐ Prep _____ ☐ Local _____
☐ Needle _____
☐ Drug(s) _____
☐ Dose _____ ☐ Attempts x _____
☐ Site _____ ☐ Level _____
☐ Catheter _____ ☐ See Remarks
Other: ☐ MAC ☐ _____

AIRWAY MANAGEMENT

Intubation: ☐ Oral Tube size _____
☐ Stylet Used ☐ Nasal ☐ Regular
☐ Magill's ☐ Direct ☐ RAE
☐ Fiber Optic ☐ Blind ☐ Armored
☐ Blade _____ ☐ Laser
☐ Secured at _____ cm ☐ Endobronch.
☐ Attempts x _____ ☐ ET CO_2 Present
☐ Breath Sounds _____
☐ Uncuffed, Leaks at _____ cm H_2O
☐ Cuffed ☐ Min. Occ. Pres. ☐ Air ☐ NS
Airway: ☐ Oral ☐ LMA ☐ Nasal ☐ Difficult,
Circuit: ☐ Circle ☐ NRB See Remarks
☐ Mask Case ☐ Nasal Cannula
☐ Via Tracheostomy ☐ Simple O_2 mask

RECOVERY

Location		Time
B/P		O_2 Sat.
P	R	T

☐ Awake ☐ Stable ☐ Nasal Oxygen
☐ Drowsy ☐ Unstable ☐ Mask Oxygen
☐ Somnolent ☐ Intubated ☐ T-Piece Oxygen
☐ Unarousable ☐ Ventilator ☐ Oral/Nasal Airway

Recovery Notes

TIME:

FLUIDS / AGENTS

															TOTALS
Oxygen (L/min)															
☐ N_2O ☐ Air (L/Min)															

MONITORS

Urine (ml)															
EBL (ml)															
EKG															
% O_2 Inspired															
O_2 Saturation															
End Tidal CO_2															
Temp: ☐ °C ☐ °F															

SYMBOLS

- × ANESTHESIA
- ⊙ OPERATION
- ⋁ ⋀ B/P CUFF PRESSURE
- ⊥ ⊤ ARTERIAL LINE PRESSURE
- ▲ MEAN ARTERIAL PRESSURE
- ● PULSE
- ○ SPONT. RESP.
- ∅ ASSISTED RESP.
- ⊠ CONTROLLED RESP.
- ⊤ TOURNIQUET

Baseline Values

200 180 160 140 120 100 80 60 40 20

B/P

P

R

VENT

Tidal Volume															
Resp. Rate															
Peak Pressure															
PEEP															
Symbols for Remarks															
Position															

FLUID TOTALS

Crystalloid _____ EBL _____
Blood _____ Urine _____
_____ _____
_____ _____

REMARKS

PATIENT IDENTIFICATION

Anesthesia Provider

CONTROLLED DRUGS

Drug	Issued	Used	Returned

Provider

Witness