

# MEDICAL RECORD - ANESTHESIA

For use of this form, see AR 40-66; the proponent agency is the OTSG

<b>ANESTHETIC AGENTS AND DRUGS</b>	<b>CONTINUOUS/REPEATED DRUGS</b> SPECIFY UNITS - MG/MCG/ML, "I"=CONSTANT INFUSION	<b>DRUG</b>	<b>(Units)</b>													<b>TOTALS</b>	<b>TOTAL EBL</b>
			( )														
			( )														
			( )														
			( )														
			( )														
			( )														
			( )														
			( )														
			( )														
	<b>VOLAT AGENT</b>	% del														<b>FLUIDS - SUMMARY</b>	
		% e.t.														CRYSTALLOID-	
	AIR	L/Min														COLLOID-	
	N2O	L/Min														BLOOD-	
	O2	L/Min															
<b>DOSE DRUGS-MARK ON GRID</b>																	
.....NUMBERS & ENTER IN REMARKS																	
<b>FLUIDS</b>	LINE site	<input type="checkbox"/> Warmed														<b>REMARKS</b> <i>Code drugs with numbers, events with letters</i>	
		<input type="checkbox"/> Warmed															
		<input type="checkbox"/> Warmed															
		<input type="checkbox"/> Warmed															
<b>LOSSES</b>		EST BLOOD LOSS															
		URINE -															

<b>PHYS STATUS</b>	<b>TIME</b>														
1 2 3 4 5 E															
<b>BODY WEIGHT:</b>	<b>SYMBOLS:</b>	220													
KG	BP by cuff	200													
LB	V	180													
<b>HEMATOCRIT:</b>	^	160													
<b>INITIAL DATA:</b>	Heart rate	140													
BP-	Resp rate	120													
HR-	BR (transduced)	100													
<b>EQUIP CHECK</b>		80													
OK?- Y N	TOURNIQUET	60													
<b>PATIENT RECHECK</b>	T	40													
OK for PROCEDURE?	ANES- X-X	20													
TIME-	PROC-														

<b>MONITORS/ACCESSORIES</b>	VT - ml														
	f - breaths/min														
	Peak inf pres / PEEP														
	MODE - S(pon), A(ssist), C(on)														
	<input type="checkbox"/> BP/Auto Cuff	<input type="checkbox"/> ET CO2 (torr)													
	<input type="checkbox"/> BP/oth	<input type="checkbox"/> FIO2 (Frac or %)													
	<input type="checkbox"/> ART line	<input type="checkbox"/> SpO2 (%)													
	<input type="checkbox"/> Steth- PC/ES	<input type="checkbox"/> ECG													
	<input type="checkbox"/> Gas analyzer	<input type="checkbox"/> TEMP-site													
		<input type="checkbox"/> N-M Block (T/4)													
<input type="checkbox"/> Warming blkt															
<input type="checkbox"/> Conv warmer															
<b>EVENTS</b>															
Mark with letters & symbols, explain under REMARKS															
Position															

<b>RECOVERY AT</b>			
PACU	ICU	(Specify)	
OTHER _____			
<b>CONDITION:</b>			
RESP-	SpO2-		
BP-	HR-		
<b>ANESTHESIA / PROCEDURE TIMES</b>			
<b>PROC ANES</b>	Start	Room	End
	Ready	Begin	End

PROCEDURES and CPT Codes:	ANESTHETIC TECHNIQUES: <i>Describe block technique under Remarks</i>
PATIENT IDENTIFICATION: <i>Typed or written entries: Name, Grade/Rate, Medical facility</i>	AIRWAY MANAGEMENT: <i>Intubation route, blade, technique, comments</i>
SURGEONS:	PROCEDURE LOCATION: DATE:
ANESTHETISTS:	PAGE      OF

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<b>ANESTHETIC AGENTS AND DRUGS</b>	<b>DRUG</b>	<b>(Units)</b>													<b>TOTALS</b>	<b>TOTAL EBL</b>		
	CONTINUOUS/REPEATED DRUGS SPECIFY UNITS - MG/MCG/ML "I" = CONSTANT INFUSION		( )															
			( )															
			( )															
			( )															
			( )															
			( )															
			( )															
			( )															<b>TOTAL URINE</b>
			( )															
		<b>VOLAT AGENT</b>	% del													<b>FLUIDS - SUMMARY</b>		
			% e.t.													CRYSTALLOID-		
		AIR	L/Min													COLLOID-		
		N2O	L/Min													BLOOD-		
		O2	L/Min															
		<b>DOSE DRUGS-MARK ON GRID</b>																
		..... NUMBERS & ENTER IN REMARKS																
<b>FLUIDS</b>	LINE site	<input type="checkbox"/> Warmed														<b>REMARKS</b>		
		<input type="checkbox"/> Warmed																
		<input type="checkbox"/> Warmed																
		<input type="checkbox"/> Warmed																
<b>LOSSES</b>		EST BLOOD LOSS																
		URINE -																

<b>PHYS STATUS</b>	<b>TIME</b>														
1 2 3 4 5 E															
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<b>PATIENT RECHECK</b>	T	40													
OK for PROCEDURE?	ANES- X-X	20													
TIME-	PROC-														

<b>MONITORS/ACCESSORIES</b>	VT - ml																			
	f - breaths/min																<b>RECOVERY AT</b>			
	Peak inf pres / PEEP																PACU ICU _____ (Specify)			
	MODE - S(pon), A(ssist), C(on)																OTHER _____			
	BP/Auto Cuff	ET CO2 (torr)															CONDITION:			
	BP/oth	FIO2 (Frac or %)															RESP- SpO2-			
	ART line	SpO2 (%)															BP- HR-			
	Steth- PC/ES	ECG															ANESTHESIA / PROCEDURE TIMES			
	Gas analyzer	TEMP-site															PROC ANES	Start	Room	End
		N-M Block (T/4)															Ready	Begin	End	
Warming blkt																				
Conv warmer																				

PROCEDURES and CPT Codes:	ANESTHETIC TECHNIQUES: Describe block technique under Remarks
PATIENT IDENTIFICATION: Typed or written entries: Name, Grade/Rate, Medical facility	AIRWAY MANAGEMENT: Intubation route, blade, technique, comments
SURGEONS:	PROCEDURE LOCATION:
ANESTHETISTS:	DATE:
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CONTINUOUS/REPEATED DRUGS SPECIFY UNITS - MG/MCG/ML, "I"=CONSTANT INFUSION		( )														
		( )														
		( )														
		( )														
		( )														
		( )														
	<b>VOLAT AGENT</b>	% del														
		% e.t.														
	AIR	L/Min														
	N2O	L/Min														
	O2	L/Min														
<b>DOSE DRUGS-MARK ON GRID</b>													<b>FLUIDS - SUMMARY</b>			
.....NUMBERS & ENTER IN REMARKS													CRYSTALLOID-			
													COLLOID-			
													BLOOD-			
													<b>REMARKS</b>			
													Code drugs with numbers, events with letters			

FLUIDS	LINE site	<input type="checkbox"/> Warmed														
		<input type="checkbox"/> Warmed														
		<input type="checkbox"/> Warmed														
		<input type="checkbox"/> Warmed														

LOSSES	EST BLOOD LOSS															
	URINE -															

PHYS STATUS	TIME															
1 2 3 4 5 E																
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____ / ____		80														
<b>HR-</b>	BR	60														
____	(transduced)	40														
<b>EQUIP CHECK</b>	+	20														
<b>OK?- Y N</b>	TOURNIQUET															
<b>PATIENT RECHECK</b>	T - <input checked="" type="checkbox"/>															
<b>OK for PROCEDURE?</b>	ANES- X-X															
<b>TIME-</b>	PROC- <input checked="" type="checkbox"/> <input checked="" type="checkbox"/>															

VENTIL	VT - ml															
	f - breaths/min															
	Peak inf pres / PEEP															
	MODE - S(pon), A(ssist), C(on)															

MONITORS/ACCESSORIES	BP/Auto Cuff	ET CO2 (torr)											<b>RECOVERY AT</b>					
	<input type="checkbox"/>														PACU	ICU _____ (Specify)		
	BP/oth	FIO2 (Frac or %)													OTHER _____			
	ART line	SpO2 (%)													<b>CONDITION:</b>			
	Steth- PC/ES	ECG													RESP-	SpO2-		
	Gas analyzer	TEMP-site													BP-	HR-		
		N-M Block (T/4)													<b>ANESTHESIA / PROCEDURE TIMES</b>			
															<b>PROC ANES</b>	Start	Room	End
	Warming blkt													Ready		Begin	End	
	Conv warmer																	

Mark with letters & symbols, explain under REMARKS      EVENTS Position →

PROCEDURES and CPT Codes:	ANESTHETIC TECHNIQUES: Describe block technique under Remarks
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