

# HOPITAL ALBERT SCHWEITZER - ANESTHESIA RECORD

CODE

• PULSE

o RESP.

$\frac{V}{A}$  B.P.

X ANES.

o OPR.

NAME (PRINT)	FIRST	LAST
DATE	HOSP. NUMBER	WARD N°
PREMEDICATION	TIME	EFFECT
1.		
2.		
3.		

SUMMARY OF PRE-OPERATE FINDINGS:      AGE:      SEX:      WT:

BP:      /      P:      HGB:      HABITUS:      TEETH:

PHYSICAL STATUS:

PRE - OP. DIAGNOSIS:      POST - OP. DIAGNOSIS:

OPERATION PERFORMED:      POSTURE:

**ANESTHESIOLOGIST**

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**SURGEON:**

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**INDUCTION AGENTS**

1. \_\_\_\_\_

2. \_\_\_\_\_

3. \_\_\_\_\_

**MAINTENANCE AGENTS**

1. \_\_\_\_\_

2. \_\_\_\_\_

3. \_\_\_\_\_

**ENDOTRACHEAL**

NASAL \_\_\_ R. \_\_\_ L. \_\_\_ ORAL \_\_\_

SIZE \_\_\_ CUFF \_\_\_ BLIND \_\_\_

**SPINAL**

POSITION      SPACE

NEEDLE      RATE INJ

AGENTS

VASOPRESSORS

**EPIDURAL**

POSITION      SPACE

NEEDLE

AGENTS      VOL

**NERVE BLOCK**

TYPE: \_\_\_\_\_

DRUGS: \_\_\_\_\_

**RECOVERY**

REFLEX IN OR YES \_\_\_ NO \_\_\_

VOMITING YES \_\_\_ NO \_\_\_

**AIRWAY TO WARD**

YES \_\_\_ NO \_\_\_

AGENTS	TIME :		MAINTENANCE
iv. Barb			
N 20			
O 200			
Ether			
Finach			
Ma. Sol			
Oxygen			
	200		200
	150		150
	100		100
	50		50
	0		0

MEDICATIONS  
 REMARKS  
 FLUIDS  
 ETC.