

<b>Surgical Diagnosis:</b> CHOLECYSTITIS APPENDICITIS		<b>Case Times:</b> 18:33 <b>Start Anesthesia</b> 19:07 <b>Start Surgery</b> 20:11 <b>End Surgery</b> 20:20 <b>End Anesthesia</b>  18:47 <b>Induction</b> 18:50 <b>Intubation</b>  107.0 <b>Total Minutes</b>		<b>Patient:</b> SAMPLE CASE  ID: 1212345 <b>Sex:</b> Male      In-Patient DOB: 12/12/1912 <b>Age:</b> 86 Years Weight: 68.2 kg      150.0 lb <b>BSA:</b> 1.8 Height: 173 cm      68 in <b>BMI:</b> 22.9 ASA: 3 Elective Preop Vitals: BP-160/88    HR-78    RR-24    Temp-37.0 NPO Status: NPO per Instructions      OR # 2																																																	
<b>Procedure(s):</b> LAP CHOLECYSTECTOMY AND CHOLANGIOGRAM LAPAROSCOPIC APPENDECTOMY		<b>Anesthesia Provider(s):</b> <b>E-Signed</b> 1: DOE, JOHN MD      06/10/2008 20:17:36 2: 3:		<b>Anesthetic Techniques:</b> <input checked="" type="checkbox"/> General <input type="checkbox"/> MAC <input type="checkbox"/> Spinal <input type="checkbox"/> Bier Block <input checked="" type="checkbox"/> Epidural <input type="checkbox"/> Nerve Block  <input type="checkbox"/> Cardiopulmonary Bypass <input type="checkbox"/> Controlled Hypotension <input type="checkbox"/> Hemodilution		<b>Lab:</b> ( ) See Patient's Record <b>ABG:</b> Hct: 42      Sodium: 140      pO2: 62 Hb: 13.1      Potassium: 38      pCO2: 42 WBC: 9100      Glucose: 110      pH: 7.42 Plts: 234      BUN: 12      HCO3: 28 PT: NL      Creatinine: 1.0      BE: 4 PTT: NL      Calcium: 9      FIO2: RA <input checked="" type="checkbox"/> ECG Done <input checked="" type="checkbox"/> CXR Done <input checked="" type="checkbox"/> TS/TC Done		<b>Physical/Airway Exam:</b> Mallempati      2 Heart&Lungs Nrml <input checked="" type="checkbox"/> Irregular Rhythm <input type="checkbox"/> Murmur <input type="checkbox"/> Rhochi <input type="checkbox"/> Wheezes <input type="checkbox"/> Decreased BS <input type="checkbox"/> Anterior Larynx <input type="checkbox"/> Small Mouth <input type="checkbox"/> Large Tongue <input type="checkbox"/> Poor Jaw ROM <input type="checkbox"/> Poor Neck ROM <input type="checkbox"/> Dentures/Partials <input type="checkbox"/> Edentulous <input type="checkbox"/> Poor Dentition <input checked="" type="checkbox"/> Missing Teeth <input type="checkbox"/> Chipped Teeth <input type="checkbox"/> Overbite <input type="checkbox"/> Caps <input type="checkbox"/>																																													
<b>Surgeon(s):</b> Primary: SMITH, J MD Assistant: JONES, T MD Assistant:		<b>Past Medical History:</b> COPD SMOKER ABNORMAL EKG DAILY ETOH CARDIOMIOPATHY		<b>Current Meds:</b> SEE PATIENT RECORD		<b>Allergies:</b> PCN SULFA CODEINE		<b>Anesthetic History:</b> DELAYED AWAKENING POST OP NAUSEA VOMITING		<b>Surgical History:</b> BLEEDING																																											
<b>Intravenous Lines &amp; Invasive Monitors:</b> <table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th>Line</th> <th>Size</th> <th>Side</th> <th>Site</th> <th>In-Place</th> </tr> </thead> <tbody> <tr> <td>IV #1</td> <td>20 Gauge</td> <td>Right</td> <td>ARM</td> <td><input checked="" type="checkbox"/></td> </tr> <tr> <td>IV #2</td> <td>16 Gauge</td> <td>Left</td> <td>HAND</td> <td><input type="checkbox"/></td> </tr> <tr> <td>IV #3</td> <td></td> <td></td> <td></td> <td><input type="checkbox"/></td> </tr> <tr> <td>IV #4</td> <td></td> <td></td> <td></td> <td><input type="checkbox"/></td> </tr> <tr> <td>Arterial 1</td> <td>20 Gauge</td> <td>Left</td> <td>RADIAL</td> <td><input checked="" type="checkbox"/></td> </tr> <tr> <td>Arterial 2</td> <td></td> <td></td> <td></td> <td><input type="checkbox"/></td> </tr> <tr> <td>Central</td> <td></td> <td></td> <td></td> <td><input type="checkbox"/></td> </tr> <tr> <td>Swan</td> <td>8 French</td> <td>Right</td> <td>INT JUGULAR</td> <td><input checked="" type="checkbox"/></td> </tr> </tbody> </table>			Line	Size	Side	Site	In-Place	IV #1	20 Gauge	Right	ARM	<input checked="" type="checkbox"/>	IV #2	16 Gauge	Left	HAND	<input type="checkbox"/>	IV #3				<input type="checkbox"/>	IV #4				<input type="checkbox"/>	Arterial 1	20 Gauge	Left	RADIAL	<input checked="" type="checkbox"/>	Arterial 2				<input type="checkbox"/>	Central				<input type="checkbox"/>	Swan	8 French	Right	INT JUGULAR	<input checked="" type="checkbox"/>	<b>Airway Circuits:</b> <input checked="" type="checkbox"/> Anesthesia Machine Checked and Suction Available  <input checked="" type="checkbox"/> Semi-Closed <input checked="" type="checkbox"/> Nasal Prongs <input type="checkbox"/> Closed Circuit <input type="checkbox"/> O2 Mask <input type="checkbox"/> Bains <input type="checkbox"/> Venti-Mask <input checked="" type="checkbox"/> Artificial Nose <input type="checkbox"/> T-Piece <input checked="" type="checkbox"/> Heated Humidifier <input type="checkbox"/> Non-Rebreather Mask			<b>Monitors Used:</b> <input checked="" type="checkbox"/> Alarms Enabled <input checked="" type="checkbox"/> NIBP <input checked="" type="checkbox"/> O2 Sat <input checked="" type="checkbox"/> A-Line <input checked="" type="checkbox"/> ETCO2 <input checked="" type="checkbox"/> Agent <input checked="" type="checkbox"/> CVP <input checked="" type="checkbox"/> EKG <input checked="" type="checkbox"/> Spirometry <input type="checkbox"/> EEG <input checked="" type="checkbox"/> ST Segments <input checked="" type="checkbox"/> Swan Ganz <input checked="" type="checkbox"/> PNS <input checked="" type="checkbox"/> Esoph Probe <input type="checkbox"/> TEE <input checked="" type="checkbox"/> FIO2 <input type="checkbox"/> Precord Steth <input checked="" type="checkbox"/> Temperature		
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<b>Patient Position(s) Used During Case:</b> <input checked="" type="checkbox"/> Supine <input type="checkbox"/> Semi-Fowler <input type="checkbox"/> Lithotomy <input type="checkbox"/> Sitting <input type="checkbox"/> Left Lateral Decubitus <input type="checkbox"/> Trendelenberg <input type="checkbox"/> Right Lateral Decubitus <input type="checkbox"/> Reverse Trendelenberg <input type="checkbox"/> Prone <input type="checkbox"/> Axillary Roll <input type="checkbox"/> Jackknife <input type="checkbox"/> Extra Padding				<b>Arms</b> <input checked="" type="checkbox"/> Arms < 90 Degrees <input type="checkbox"/> Left Arm @ Side <input type="checkbox"/> Right Arm @ Side  <b>Eye Care</b> <input checked="" type="checkbox"/> Eyes Taped Closed <input type="checkbox"/> Eye Lubrication		<b>Accessories:</b> <input type="checkbox"/> Blood Recovery System <input checked="" type="checkbox"/> In-Line Filter <input type="checkbox"/> Doppler <input type="checkbox"/> Rapid Fluid Infuser <input type="checkbox"/> Fluid Warmer <b>Warming Blanket(s)</b> <input type="checkbox"/> Heating Lamp(s) <input checked="" type="checkbox"/> Air Blanket <input checked="" type="checkbox"/> Humidifier <input type="checkbox"/> Water Blanket <input type="checkbox"/> Infusion Pump(s)																																															
<b>Airway Management:</b> <b>Induction</b> <input type="checkbox"/> Mask Induction <input checked="" type="checkbox"/> IV Induction <input checked="" type="checkbox"/> Pre O2 <input type="checkbox"/> Rapid Sequence <input checked="" type="checkbox"/> Cricoid Pressure  <b>Airways</b> <input checked="" type="checkbox"/> Oral Airway <input type="checkbox"/> Nasal Airway		<b>Tube</b> Type: ETT Size: 8.0 Route: Orally Depth: 22 Cuffed <input checked="" type="checkbox"/> (Inflated to 5) Attempts: 3		<b>Methods</b> <input checked="" type="checkbox"/> Direct Laryngoscopy <input type="checkbox"/> Blind Technique <input type="checkbox"/> Fiberoptic Scope <input checked="" type="checkbox"/> Tube Changer Stylet <input type="checkbox"/> Wire Stylet <input checked="" type="checkbox"/> Fast Track LMA <input type="checkbox"/> Awake Technique <input type="checkbox"/> In Place On Arrival		<b>Blade</b> Blade Type: Curved Blade Size: 4  <b>Visualization</b> No Cords / No Arytenoids  <b>Mask Ventilation</b> Adequate		<b>Confirmation</b> <input checked="" type="checkbox"/> Endtidal Carbon Dioxide <input checked="" type="checkbox"/> Bilateral Breath Sounds <input checked="" type="checkbox"/> Tube Secured  <b>Comment</b> Anterior larynx, poor neck extension, poor mouth opening. Failed DL. Success with Fast Track.																																													
<b>Regional Anesthetic(s)</b> Block 1: EPIDURAL Time: 18:45    Attempts: 1 Needle: 18 GA 3.5" HUSTED Location: L3-4 Position: Sitting Amount: 3 CC TEST DOSE Local: .5% BUPIVACAINE + EPI  Comment: Without Heme, CSF or paresthesias. All doses in divided increments. Catheter depth at skin - 10 cm			Block 2: Time: Needle: Location: Position: Amount: Local:  Comment:			Block 3: Time: Needle: Location: Position: Amount: Local:  Comment:																																															

**Post-op Note:** ( ) No complaints or apparent complications from anesthesia

( ) See Progress Notes

PATIENT: Sample Case ID: 1212345

CASE TIME:			18:40	18:50	19:00	19:10	19:20	19:30	19:40	19:50	20:00	20:10	20:20	20:30												
GASES & AGENTS	FI-OXYGEN PCT		-	-	66	55	55	52	51	50	48	50	48	48	49	51	50	49	50	48	48	60	90	-	-	-
	AIR FLOW LPM		-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
	O2 FLOW LPM	3NP	3NP	4	4	4	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	8	1	8	-
	N2O FLOW LPM			4	4	4	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	0	1	0	-
	FI-N2O PCT		-	-	40	50	46	50	50	48	48	49	48	47	46	48	48	49	51	50	55	40	20	-	-	-
	FE-N2O PCT		-	-	35	48	40	48	48	47	46	45	44	42	42	44	43	43	48	46	50	36	15	-	-	-
	FI-AGENT PCT		-	-	-	D 1.1	D 6.0	D 7.1	D 7.7	D 6.8	D 7.0	D 7.0	D 7.0	D 7.0	D 6.9	D 7.0	D 6.8	D 6.8	D 6.8	D 4.0	D 2.0	D 2.0	D 0.0	D 6.8	D 6.8	-
	FE-AGENT PCT		-	-	-	3.4	4.6	6.0	6.8	6.5	6.4	6.0	6.2	6.4	6.2	6.3	6.2	6.2	6.5	6.4	4.5	2.0	0.5	-	-	-
CASE TOTALS	FI-CO2 MM HG		-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
	FE-CO2 MM HG		-	34	35	29	42	41	35	34	35	34	33	33	32	32	34	31	33	34	34	40	41	-	-	-
EEG			-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-

2.00	VERSED mg	2.00	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
10.00	FENTANYL cc	1.00	-	9.00	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
125	PENTOTHAL mg	-	-	125	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
10.00	EPHEDRINE mg	-	-	-	-	10.00	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
10.00	NORCURON mg	-	-	8.00	-	-	-	-	2.00	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
1000	CEFAZOLIN mg	-	-	-	1000	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
5.00	ENLON PLUS cc	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	5.00	-	-	-	-

Infusions			-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
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Total	NITROGLYC u/K/M	-	1	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
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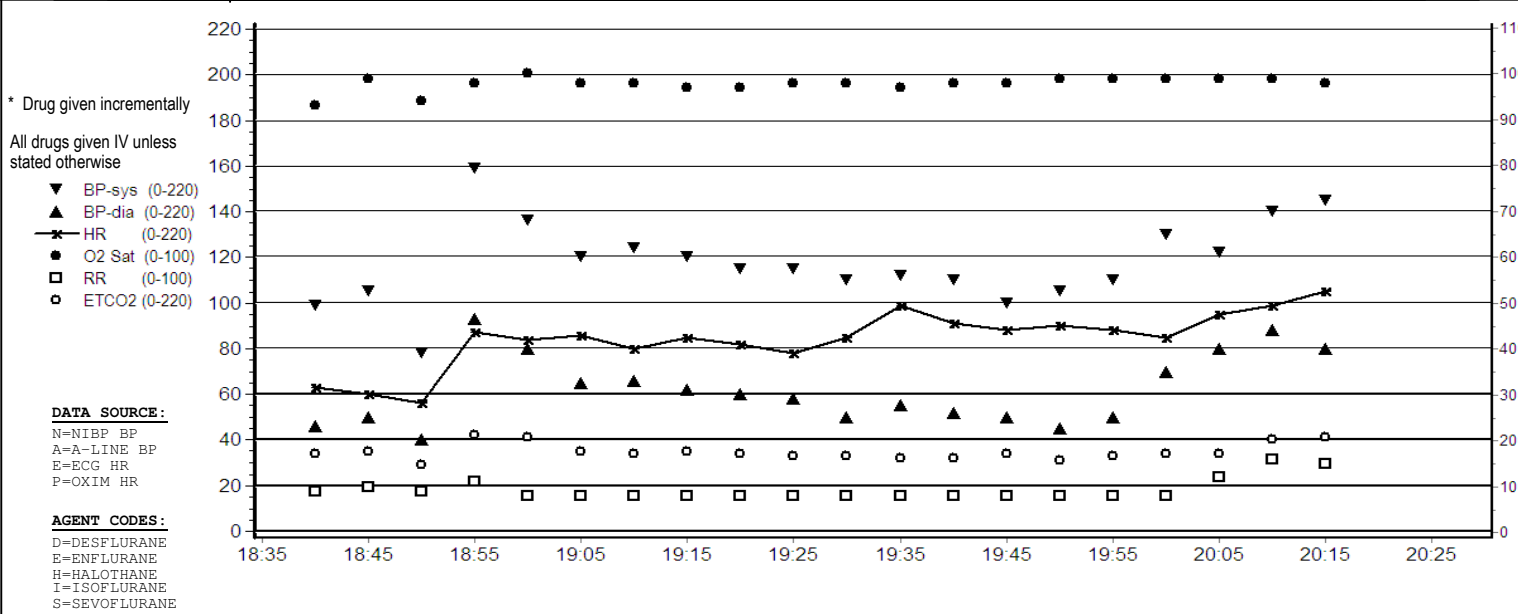
Total	Input-Output	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
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	LACTATED RINGRS	800	-	-	-	1000	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
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375 ml	Urine Output	-	-	-	-	-	-	150	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
200 ml	Est Blood Loss	-	-	-	-	-	-	150	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
	Other Losses	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-

	TEMP C. DEGREES	-	36.9	-	36.7	36.7	36.9	36.7	36.7	36.4	36.4	36.2	36.1	35.9	35.6	35.5	35.4	35.5	35.4	35.3	35.2	35.3	-	-	-	-
	TIDAL VOLUME CC	-	-	-	1200	805	1106	893	790	800	805	815	810	800	804	803	812	804	800	805	250	340	-	-	-	-
	PIP CM H2O	-	-	-	25	32	21	23	19	22	23	22	21	24	24	23	22	24	22	23	-	-	-	-	-	-
	CVP MM HG	-	6	-	3	6	7	7	2	-	6	-	8	-	-	10	8	8	10	8	6	6	-	-	-	-
	PA SYS BP MM HG	-	21	-	20	27	31	29	29	28	26	27	25	24	22	23	24	26	28	24	25	24	-	-	-	-
	PA DIA BP MM HG	-	10	-	10	16	16	16	15	14	14	15	12	12	10	11	11	18	17	14	13	14	-	-	-	-
	PA WEDGE MM HG	-	4	-	16	-	-	12	-	-	-	14	-	-	-	9	-	-	15	-	-	12	-	-	-	-
	CARD OUTPUT LPM	-	3.5	-	-	4.1	-	-	3.3	-	-	-	4.5	-	-	4.1	-	-	4.6	-	-	4.8	-	-	-	-

	BP-SOURCE CODE	-	A	A	A	A	N	A	A	A	A	A	A	A	A	A	A	A	A	A	A	-	-	-	-	-
	HR-SOURCE CODE	-	E	E	E	E	E	E	E	E	E	E	E	E	E	E	E	E	E	E	E	-	-	-	-	-
	ECG RHYTHM	-	SR	SR	SR	SR	SR	SR	SR	SR	SR	SR	SR	SR	SR	PVCs	SR	SR	PVCs	SR	SR	SR	SR	SR	SR	SR



**COMMENTS:**

18:33- ARRIVED OR, ID CONFIRMED, RE-EVALUATED, MONITORS APPLIED  
 18:34- ARRIVED FROM ICU WITH ART LINE AND SWAN IN PLACE  
 18:50- ANTIBIOTIC PER SURGEON REQUEST  
 19:02- NASAL GASTRIC TUBE INSERTED PER REQUEST  
 19:04- FOLEY CATHETER INSERTED  
 19:55- CLOSING