Discrete Data Recovery
Department of Anesthesiology

PROCEDURE _____

DIAGNOSIS Primary: _____ Secondary: _____

ANESTHESIA ☐ General ☐ Spinal ☐ CSE ☐ Epidural ☐ PNB ☐ MAC

MODIFIERS

ASA ☐ 1 ☐ 2 ☐ 3 Diagnosis (if >ASA2): _____

Emergency ☐ Yes ☑ No Controlled Hypotension: ___Yes Double Lumen Tube/UV: ___Yes

Ambulatory ☑ Yes ☐ No Cell Salvage Device: ___Yes Fiberoptic Intubation: ___Yes

Position ☐ Supine ☐ Beach Chair / Sitting ☐ Lateral ☐ Prone Other: _____

Arterial Line ___Yes Start Time: _____ Stop Time: _____ Diagnosis: _____

CVP ___Yes Start Time: _____ Stop Time: _____ Diagnosis: _____

POSTOPERATIVE PAIN (Block/Catheter):

1. Description: _____ Start Time: _____ Stop Time: _____ U/S ☐ Yes ☐ No

2. Description: _____ Start Time: _____ Stop Time: _____ U/S ☐ Yes ☐ No

3. Description: _____ Start Time: _____ Stop Time: _____ U/S ☐ Yes ☐ No

COVERAGE (check one only)

☐ Attending Only ☐ Single Coverage ☐ Double Coverage ☐ CRNA Only

CRNA Name: _____ Start Time: _____ Stop Time: _____

Resident Name: _____ Start Time: _____ Stop Time: _____

Fellow Name: _____ Start Time: _____ Stop Time: _____

ATTENDING RELIEF If Applicable (please specify name and start/stop times)

Reliever 1: _____Start Time: _____ Stop Time: _____ Double coverage: ☐ Yes ☐ No

COMPLIANCE

Preoperative antibiotic within one hour of incision:_____

Antibiotic Name   *Dose*   *Time Administered*

Temperature Management: (check one only)

☐ Forced Air Warmer Utilized ☐ Not Indicated

If CVP/PA catheter placed, "CLIP" Protocol utilized: ___Yes ___No

Name: _____ Signature: _____

Case Start Time : _____ Case Stop Time: _____