Backer for Part 1 Only

Date

Time

HEALTHCARE

PREOPERATIVE ASSESSMENT AND TRANSFER SHEET

ANESTHESIA

	W.				PATIENT IDEN	TIFICATION
AGESEXHT	WT	9P	P	SaO ₂	TEMP	R
DX						
LHOLOSED PHOCEDOKE						
PMH	_3 <u>/23</u>		<u> </u>			
						
		- <u> </u>				
PAIN: Tyes The No Site					Pain Score	(0 - 10)
		···				
MEDICATIONS	in landada	*		<u> </u>		
			<u> </u>			
					<u>.</u>	
PREVIOUS ANESTHERED.			4: 	<u> </u>		
INCAIDOS MINESTINETINS: TARS	U. NO	Problems:	Yee	□ No	2000 PA 37	
MILY HISTORY (Anesthesia Proble	term and and another	Market Co led beam			· · · · · · · · · · · · · · · · · · ·	
NPO: Yes No Time						
RELEVANT LABS / DX. STUDIES	_		·0			
		- 27			- -	
AIRWAY ASSESSMENT	sa kon a las	# - W				
PLAN OF ANESTHESIA: 🔲 General	☐ Region:	al 🗍 IVAS	☐ MAC			Patrick Patrick
					Sin water.	
	· · · · · · · · · · · · · · · · · · ·	· · · · · · · · · · · · · · · · · · ·	-			
NSA STATUS	<u> </u>		Emerger	cy: 🔲 Yes	□ No	
SLOOD USE: Not Anticipated	☐ Anticipa		Anticipat	ed Risks & Alter	matives Discus	sad: 🗌 Yes 🔲 No
HE PATIENT IS SUITABLE CANDID	ATE FOR THE	PLANNED	ANESTHE	TC AND PROC	EDURE.	
Physician Signature					Date	Time
ASE TRANSFER DATA						
Responsibility for patient management	and monitoring	transferred	ofter report	to Delief su		
wst Attending Signature	ario monnomy	i transicitéd,	erren rehou	, to Hellet Atten	Ding Anesthesi	ologist(s)
irst Attending Signature Second Attending Signature	2 1	450 April 1997		2.5	Date	Time
Second Attending Signature	- 175 Y					Time
Responsibility for patient management	and monitoring	transferred,	after report	, to PACU staff	<u></u>	
AD Signature			·		Date	Time
CU.ACCEPTANCE OF TRANSFER	<u> </u>					
Responsibility for patient management	and monitoring	transform	shor make	to della minde		
ID Signature		SCHOLALIAN,	erren rebût	. IO ILU SIBIT		