UNIVERSITY
MEDICAL CENTER
PROGRESS RECORD

AFFIX PATIENT INFO LABEL HERE

Patient Name _____ MR# _____

Note progress in case, complications, consultations, change in diagnosis, condition on discharge, instructions to patient

CARDIAC SURGERY OPERATIVE REPORT PROGRESS NOTE

DATE: _____

SURGEON: _____

ASSISTANT: ❑ Khan ❑ Ghodsi ❑ Dolcemascolo
❑ Hunter ❑ Skantharaja
❑ _____ ❑ Resident _____

CARDIAC SURGERY RESIDENT:

NOT AVAILABLE ❑
NOT ASSIGNED TO HUMC ❑
ASSIGNED TO ANOTHER CASE ❑

SURGERY/PROCEDURE PERFORMED: _____

_____

POST-OP DIAGNOSIS/FINDINGS: _____

_____

ESTIMATED BLOOD LOSS: _____

DRAINS: _____ TISSUE REMOVED/ SPECIMENS: _____ POST-OP CONDITION: _____

CLEAN: _____ CLEAN CONTAMINATED: _____ CONTAMINATED: _____ INFECTED: _____

REPORT DICTATED: _____ JOB NUMBER: _____ DATE: _____

_____
SIGNATURE