Anesthesia and Recovery Record

PATIENT INFORMATION	Date:			Owner consent signed:	
Animal name:				Owner name:	
Age:				Contact number:	
Sex: M F	Neutered: Yes	No			
Vet:				Species:	
Nurse:				Breed:	
				Weight:	

History: Clinical findings / results / medications	ASA Classification
	I. Healthy animal, elective surgery
	II. Moderate abnormality
Ongoing treatment / medication:	III. Severe abnormality
	IV. Life threatening abnormality
	V. Moribund
Procedure:	E. Emergency
Current pain: None Mild Moderate Severe	**Planned duration:**
Expected pain: None Mild Moderate Severe	< 30 MINUTES
Additional risks: Hemorrhage Sepsis Open cavities Hypotension	30-60 MINUTES
Hypothermia Hypoventilation Hypoxia Arrhythmia	60-90 MINUTES
	> 90 MINUTES

CLINICAL EXAMINATION				
Temperature	Resp. rate	CRT	Total protein	BUN/Creatinine
Heart rate	Mucous membranes	Pulse quality	PCV	Thoracic auscultation
Other (examinations/bloodwork):				

TEMPERAMENT			
Gentle/social	Fearful/Possible caution	Aggressive/Feral	Other

PREMEDICATION				
Medicine used	Dose (mg)	Dose (ml)	Route	Time
1				
2				
3				
IV Catheter: Placed	Position	Size	Vomited: Yes	No
Sedation:	None	Minimal	Moderate	Profound
Comments:				

INDUCTION		
Agent:	Breathing system:	Fluid therapy:
Dose:	Patient position:	Intra-operative IV fluids: Yes No
Time:	Patient warming:	Type:
Safety checklist completed:	ETT / LMA / Mask:	Rate:
Eyes lubricated:	Size:	
Cuffed: Yes No		
Comments:		

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EVENTS	• RR	x HR	^ SAP	v MAP	- DAP
Time:	Pre-op				
Iso / Sevo %					
O_2 L/min					
N_2O L/min					
mmHg					
SpO_2 %					
Temperature °C/°F					

200
190
180
170
160
150
140
130
120
110
100
90
80
70
60
50
40
30
20
10

Intra-operative events:

POST-OPERATIVE INSTRUCTIONS

Medication:	Dose:	Route:	Time:
Medication:	Dose:	Route:	Time:
Medication:	Dose:	Route:	Time:
Other post-op care:	Remove IV catheter: Yes ○	No ○	
Post-op IV fluids:	Transfer relevant information to patient record/kennel sheet: ○		

RECOVERY

End of surgery time:
Total surgery time:
Temperature:
Extubation time:
Recovery monitoring checks performed (min) T5 ○ T10 ○ T30 ○

POST-OPERATIVE PAIN

Pain: Mild ○ Moderate ○ Severe ○

Pain scoring:

Medication	Dose	Frequency
1		
2		
3		

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