PATIENT NAME (LAST, FIRST, MI): PRIMARY DIAGNOSIS (REASON FOR CURRENT OP):

 (IE STATUS POST BIDIRECTIONAL GLENN)

MR # \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

DATE OF BIRTH:\_\_\_/\_\_\_\_/\_\_\_\_\_

HOSPITAL ADMISSION:\_\_\_/\_\_\_/\_\_\_\_ FUNDAMENTAL DIAGNOSIS (UNDERLYING DIAGNOSIS):

 (IE HYPOPLASTIC LEFT HEART SYNDROME)

DATE OF PROCEDURE:\_\_\_/\_\_\_/\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

PROCEDURES PERFORMED:

1. Internal Control/Tracking Number:\_\_\_\_\_\_\_\_\_\_
2. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
3. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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| **NONCARDIAC CONGENITAL ANATOMIC ABNORMALITIES (select all that apply)** NCAA (530) |
|  |  None |
|  |  Major abnormality of head, Choanal atresia |
|  |  Major abnormality of head, Cleft lip |
|  |  Major abnormality of head, Cleft palate |
|  |  Major abnormality of head |
|  |  Major abnormality of brain, Hydrocephalus |
|  |  Major abnormality of brain, Macrocephaly |
|  |  Major abnormality of brain, Microcephaly |
|  |  Major abnormality of brain |
|  |  Major abnormality of spinal cord, Myelomeningocele |
|  |  Major abnormality of spinal cord, Spina bifida |
|  |  Major abnormality of spinal cord |
|  |  Major abnormality of spine, Scoliosis |
|  |  Major abnormality of spine |
|  |  Major abnormality of larynx - trachea - or bronchus, Laryngomalacia |
|  |  Major abnormality of larynx - trachea - or bronchus, Congenital tracheal stenosis |
|  |  Major abnormality of larynx - trachea - or bronchus, Tracheomalacia |
|  |  Major abnormality of larynx - trachea - or bronchus, Tracheoesophageal fistula (TEF) |
|  |  Major abnormality of larynx - trachea - or bronchus, Bronchomalacia |
|  |  Major abnormality of larynx - trachea - or bronchus |
|  |  Major abnormality of lung, Congenital lobar emphysema (CLE) |
|  |  Major abnormality of lung, Cystic congenital adenomatous malformation of the lung (CAM) |
|  |  Major abnormality of lung, Cystic fibrosis |
|  |  Major abnormality of lung, Pulmonary lymphangiectasia |
|  |  Major abnormality of lung |
|  |  Major abnormality of abdominal wall, Congenital diaphragmatic hernia (CDH) |
|  |  Major abnormality of abdominal wall, Gastroschisis |
|  |  Major abnormality of abdominal wall, Omphalocele |
|  |  Major abnormality of gastrointestinal system, Biliary atresia |
|  |  Major abnormality of gastrointestinal system, Duodenal atresia |
|  |  Major abnormality of gastrointestinal system, Duodenal stenosis |
|  |  Major abnormality of gastrointestinal system, Jujenal atresia |
|  |  Major abnormality of gastrointestinal system, Jujenal stenosis |
|  |  Major abnormality of gastrointestinal system, Ileal atresia |
|  |  Major abnormality of gastrointestinal system, Ileal stenosis |
|  |  Major abnormality of gastrointestinal system, Intestinal malrotation |
|  |  Major abnormality of gastrointestinal system, Hirschsprung's disease (Congenital aganglionic megacolon) |
|  |  Major abnormality of gastrointestinal system, Stenosis of large intestine |
|  |  Major abnormality of gastrointestinal system, Atresia of large intestine |
|  |  Major abnormality of gastrointestinal system, Atresia of rectum |
|  |  Major abnormality of gastrointestinal system, Stenosis of rectum |
|  |  Major abnormality of gastrointestinal system, Anal Atresia (imperforate anus) |
|  |  Major abnormality of gastrointestinal system |
|  |  Major abnormality of kidney - ureter - or bladder |
|  |  Other |
|  |  *(If NCAA is Other ↓)*   \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Major Noncardiac Abnormality- Other- Specify NCAAOthSp (540) |
| **CHROMOSOMAL ABNORMALITIES** ChromAb (570) |
| 🞎 | No chromosomal abnormality identified | 🞎 | 5p |
| 🞎 | 11p15.5 | 🞎 | 6p12 |
| 🞎 | 11q | 🞎 | 7q11 |
| 🞎 | 12p1.21 | 🞎 | 7q11.23 |
| 🞎 | 12p12.1 | 🞎 | 7q32 |
| 🞎 | 12q24 | 🞎 | 7q34 |
| 🞎 | 15q21.1 | 🞎 | 8q12 |
| 🞎 | 1q42.1 | 🞎 | TGFBR1 or 2 |
| 🞎 | 20p12 | 🞎 | Trisomy 08 |
| 🞎 | 22q11 deletion | 🞎 | Trisomy 09 |
| 🞎 | 2p21 | 🞎 | Trisomy 13 |
| 🞎 | 3p22 | 🞎 | Trisomy 18 |
| 🞎 | 45X0 | 🞎 | Trisomy 21 |
| 🞎 | 47,XXY | 🞎 | Other chromosomal abnormality |
| 🞎 | 4p |  *(If ChromAb is Other chromosomal abnormality ↓)* |
| 🞎 | 4p16 |   \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Chromosomal Abnormality - Other - Specify ChromAbOthSp (580)  |
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| **SYNDROMES (select all that apply)** Syndrome (610) |
| 🞎 | No syndromic abnormality identified | 🞎 | Long QT syndrome (Ward Romano syndrome) |
| 🞎 | Alagille syndrome (intrahepatic biliary duct agenesis) | 🞎 | Marfan syndrome |
| 🞎 | Apert syndrome | 🞎 | Marfan-like syndrome |
| 🞎 | Brugada syndrome (Sudden unexplained nocturnal death syndrome) (SUNDS) | 🞎 | Mucopolysaccharidosis type IH (Hurler syndrome) |
| 🞎 | Cardiofaciocutaneous syndrome | 🞎 | Mucopolysaccharidosis type IH/S (Hurler-Scheie syndrome) |
| 🞎 | Carpenter syndrome | 🞎 | Mucopolysaccharidosis type II (Hunter syndrome) |
| 🞎 | Cat-eye syndrome | 🞎 | Mucopolysaccharidosis type IS (Scheie syndrome) |
| 🞎 | CHARGE Association | 🞎 | Noonan syndrome |
| 🞎 | Cornelia de Lange syndrome | 🞎 | Patau syndrome (Trisomy 13) |
| 🞎 | Costello syndrome | 🞎 | Pierre Robin syndrome |
| 🞎 | Cri-du-chat syndrome | 🞎 | Prune Belly syndrome |
| 🞎 | Deletion 10p syndrome | 🞎 | Rethore syndrome (Trisomy 9) |
| 🞎 | Deletion 8p syndrome | 🞎 | Fetal Rubella syndrome (Congenital rubella syndrome) |
| 🞎 | DiGeorge syndrome (velocardiofacial syndrome) (conotruncal anomaly face syndrome) (22q11 deletion)  | 🞎 | Rubinstein-Taybi syndrome |
| 🞎 | Down syndrome (Trisomy 21) | 🞎 | Short QT syndrome |
| 🞎 | Edwards syndrome (Trisomy 18) | 🞎 | Sickle cell disease |
| 🞎 | Ehlers- Danlos Syndrome | 🞎 | Sickle cell trait |
| 🞎 | Ellis-van Creveld syndrome | 🞎 | Situs inversus |
| 🞎 | Fetal alcohol syndrome (FAS) | 🞎 | Smith-Lemli-Opitz syndrome |
| 🞎 | Fetal drug exposure | 🞎 | Turner syndrome (45XO) |
| 🞎 | Goldenhar syndrome | 🞎 | VACTERL syndrome (VACTER/VATER/VATERR syndrome) |
| 🞎 | Heterotaxy syndrome | 🞎 | VACTERL-H syndrome (VATER association with hydrocephalus) (Briard-Evans syndrome) |
| 🞎 | Heterotaxy syndrome, Asplenia syndrome | 🞎 | Von Willebrand disease (vWD) |
| 🞎 | Heterotaxy syndrome, Polysplenia syndrome | 🞎 | Warkany syndrome (Trisomy 8) |
| 🞎 | Holt-Oram syndrome | 🞎 | Williams syndrome (Williams-Beuren syndrome) |
| 🞎 | Jacobsen syndrome | 🞎 | Wolff-Parkinson-White syndrome (WPW syndrome) |
| 🞎 | Kabuki syndrome | 🞎 | Wolf-Hirschhorn syndrome |
| 🞎 | Kartagener syndrome (Siewert syndrome) (Primary ciliary dyskinesia) | 🞎 | Other syndromic abnormality |
| 🞎 | Klinefelter syndrome (XXY Syndrome) |  | *(If Other Syndromic abnormality, Specify ↓)* |
| 🞎 | LEOPARD syndrome |  | Syndrome – Other – Specify SyndromeOthSp (620) |
| 🞎 | Loeys-Dietz syndrome |  |

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| **OPERATIVE**  |
| **Procedure Location:** ProcLoc (1000) | 🞎 Cardiac OR  | 🞎 ICU  | 🞎 SICU  |
| 🞎 General OR | 🞎 CVICU | 🞎 Radiology Suite |
| 🞎 Hybrid Suite  | 🞎 NICU  | 🞎 Procedure Room |
| 🞎 Cath lab | 🞎 PICU | 🞎 Other |
| **Status:** Status (1001) | 🞎 Elective  | 🞎 Urgent | 🞎 Emergent | 🞎 Salvage |
| **Operation Type**: OpType (1002) | 🞎 CPB | 🞎 No CPB Cardiovascular  | 🞎 ECMO |
| 🞎 Thoracic  | 🞎 Interventional Cardiology | 🞎 VAD w/ CPB  |
| 🞎 VAD w/out CPB  | 🞎 NonCardiac/NonThoracic Procedure w/ Anesthesia  | 🞎 Other |
|  |
| OR Entry Time: *(00:00 – 23:59)* \_\_ \_\_: \_\_ \_\_ OREntryT (1013) | Skin Incision Start Time: *(00:00 – 23:59)* \_\_ \_\_: \_\_ \_\_ SIStartT (1014) |
|  |  |  |
| Time of Skin Closure: *(00:00 – 23:59)* \_ \_:\_ \_ SIStopT (1021) | OR Exit Time: *(00:00 – 23:59)* \_ \_:\_ \_ORExitT (1022) | Extended Through Midnight: 🞎 Yes 🞎 No MultiDay (1023)  |

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| **ANESTHESIA** (for sites participating in anesthesiology component) |
| **ANESTHESIA Administrative** |
|  |
| Primary Anesthesiologist Attending: PrimAnesName (4590) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
|  |
| Primary Anesthesiologist National Provider Identifier: PrimAnesNPI (4600) **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** |
| Secondary Anesthesiologist Attending: SecAnes (4610) | 🞎 Yes 🞎 No |  |
| Fellow or Resident Present FelRes (4630) | 🞎 Yes 🞎 No |  |
| Mid-Level provider CRNA/AA Present CRNA (4640) | 🞎 Yes 🞎 No |  |
| **ANESTHESIA Preoperative**  |
| Preoperative Medication Category: PreopMedCat (4700) |
| 🞎 | None *(If not None, select all pre-operative medications that apply: ↓)* |  |
| 🞎 | ACE Inhibitors | 🞎  | Milrinone |  |
| 🞎 | Amiodarone | 🞎  | Narcotics |  |
| 🞎 | Anti-reflux Medications (H2 antagonists, PPI, propulsives) | 🞎  | Nitric Oxide |  |
| 🞎 | Anti-seizure medications | 🞎  | Nitroglycerin |  |
| 🞎 | Aspirin | 🞎  | Nitroprusside |  |
| 🞎 | Benzodiazepines | 🞎  | Norepinephrine (Levophed) |  |
| 🞎 | Beta Blockers | 🞎  | PDE-5 Inhibitors (e.g., Sildenafil) |  |
| 🞎 | Birth Control (Oral, IM) | 🞎  | Platelet inhibitors other than Aspirin (e.g., Plavix) |  |
| 🞎 | Bronchodilators, Inhaled | 🞎  | Prostacyclin (e.g., Flolan, Remodulin) |  |
| 🞎 | Calcium Channel Blockers | 🞎  | Prostaglandin |  |
| 🞎 | Calcium Chloride infusion | 🞎  | Psychiatric Medications (including ADHD and antidepressants) |  |
| 🞎 | Coumadin | 🞎 | Statins |  |
| 🞎 | Digoxin | 🞎 | Steroids (oral / IV) |  |
| 🞎 | Direct Thrombin Inhibitors (e.g., argatroban) | 🞎 | Thyroid Hormone |  |
| 🞎 | Diuretics | 🞎 | Transplant Rejection Inhibition Meds (other than steroids) |  |
| 🞎 | Dobutamine | 🞎 | Vasopressin |  |
| 🞎 | Dopamine | 🞎 | Antiarrhythmics not otherwise listed |  |
| 🞎 | Endothelin Antagonist (e.g., Bosentan) | 🞎 | Inotropes not otherwise listed |  |
| 🞎 | Epinephrine | 🞎 | Vasodilators not otherwise listed |  |
| 🞎 | Heparin | 🞎 | Vasoconstrictors not otherwise listed |  |
| 🞎 | Heparin, Low molecular weight | 🞎 | Other |  |
| 🞎 | Insulin |  |  |  |
| Preoperative Sedation PreopSed (4710) | 🞎 Yes 🞎 No  |  |
|  | *(If Yes→)* | Preoperative Sedation Route PreopSedRte (4720) | 🞎 IM 🞎 IV 🞎 Nasal 🞎 PO (Oral) 🞎 Rectal |
|  | *(If Yes, select all pre-operative sedation drugs that apply: ↓)* |  |
|  | Atropine PreopSedDrugAtro (4730) | 🞎 Yes 🞎 No | Ketamine PreopSedDrugKet (4770) | 🞎 Yes 🞎 No |
|  | Demerol PreopSedDrugDem (4740) | 🞎 Yes 🞎 No | Lorazepam PreopSedDrugLoraz (4780) | 🞎 Yes 🞎 No |
|  | Dexmedetomidine PreopSedDrugDex(4741) | 🞎 Yes 🞎 No | Midazolam PreopSedDrugMidaz (4790) | 🞎 Yes 🞎 No |
|  | Diazepam PreopSedDrugDiaz (4750) | 🞎 Yes 🞎 No | Morphine PreopSedDrugMorph (4800) | 🞎 Yes 🞎 No |
|  | Glycopyrrolate PreopSedDrugGlyco (4760) | 🞎 Yes 🞎 No | Pentobarbital PreopSedDrugPent (4810) | 🞎 Yes 🞎 No |
|  |  |  |  |  |
| Preoperative Oxygen Saturation: PreopO2Sat (4820) \_\_\_\_\_\_\_\_\_ % |  |
| Preoperative Oxygen Supplementation PreopOxygen (4830) | 🞎 Yes 🞎 No |  |
| Date and Time of Transport to Procedure Location Or Anesthesia Start Time: *mm/ dd/ yyyy hh : mm* \_ \_ / \_ \_ / \_ \_ \_ \_ \_ \_:\_ \_ PLocTransDT (4840)  |
| **ANESTHESIA Monitoring** |
| Arterial LineArtLine (4850) | 🞎 Yes 🞎 No | *(If Yes →)*Type: *(Select all that apply)* |  |  |
|  | Radial ArtLineTypeRad (4860)  | 🞎 Yes 🞎 No | Brachial ArtLineTypeBrach (4870)  | 🞎 Yes 🞎 No |
|  | Axillary ArtLineTypeAx (4880)  | 🞎 Yes 🞎 No | Femoral ArtLineTypeFem (4890)  | 🞎 Yes 🞎 No |
|  | Ulnar ArtLineTypeUlnar (4900)  | 🞎 Yes 🞎 No | Dorsalis Pedis ArtLineTypeDors (4910) | 🞎 Yes 🞎 No |
|  | Posterior Tibial ArtLineTypePost (4920)  | 🞎 Yes 🞎 No | Umbilical ArtLineTypeCent (4930) | 🞎 Yes 🞎 No |
|  |
| Cutdown Cutdown (4940) | 🞎 Yes 🞎 No | *(If Yes →)*Type: *(Select all that apply)* |  |  |  |
|  | Radial CutdownRad (4950)  | 🞎 Yes 🞎 No | Femoral CutdownFem (4960)  | 🞎 Yes 🞎 No |
|  | Ulnar CutdownUln (4970)  | 🞎 Yes 🞎 No | Other CutdownOth (4980) | 🞎 Yes 🞎 No |
|  |
| Percutaneous Central Pressure PercCentPress (4990) | 🞎 Yes 🞎 No | *(If Yes →)* Location: *(Select all that apply)* |
|  | Right Internal Jugular PCPLocRJug (5000)  | 🞎 Yes 🞎 No | Left Internal Jugular PCPLocLJug (5010)  | 🞎 Yes 🞎 No |
|  | Right Subclavian PCPLocRSub (5020)  | 🞎 Yes 🞎 No | Left Subclavian PCPLocLSub (5030)  | 🞎 Yes 🞎 No |
|  | Right Femoral Vein PCPLocRFem (5040)  | 🞎 Yes 🞎 No | Left Femoral Vein PCPLocLFem (5050)  | 🞎 Yes 🞎 No |
|  | Other PCPLocOth (5060) | 🞎 Yes 🞎 No |  |  |
|  |  |  |  |  |
| CVP Placed by Anesthesia CVPPlaced (5070) | 🞎 Yes 🞎 No |  |
| Swan-Ganz Catheter SGCath (5080) | 🞎 Yes 🞎 No |  |
| Oximetric Central Line (ScVO2) ScVO2 (5090) | 🞎 Yes 🞎 No |  |
| Ultrasound Guidance Used for Line Placement: UltraDopGuide (5100) | 🞎 None🞎 Arterial line | 🞎 Central venous line🞎 Both arterial & venous lines |
|  |
| Neurologic Monitoring NeuroMonitor (5110) | 🞎 Yes 🞎 No |  |
|  | *(If Yes →)*  | Bispectral Index NeuroMonBIS (5130)Transcranial Doppler NeuroMonTCD (5140)NIRS (Cerebral) NeuroMonNIRS (5141)Other NeuroMonOth (5150) | 🞎 Yes 🞎 No🞎 Yes 🞎 No🞎 Yes 🞎 No🞎 Yes 🞎 No |
| Lowest Recorded Intraoperative Temperature: LowIntraopTemp (5160) | \_\_\_\_\_\_\_\_\_ *° C* |  |
| Lowest Intraoperative Temperature Site: IntraopTempSite (5170) | 🞎 Nasal 🞎 Esophageal 🞎 Bladder 🞎 Rectal 🞎 Axillary 🞎 Skin 🞎 Tympanic 🞎Other |
| Transesophageal Echocardiography TEE (5180) | 🞎 Yes 🞎 No |  |  |
|  |  |  |  |
| **ANESTHESIA Anesthetic Technique** |
| Date and Time of Induction: *mm/ dd/ yyyy hh : mm* \_ \_ / \_ \_ / \_ \_ \_ \_ \_ \_:\_ \_ InductionDT (5190)   |
| Induction Type: |  |
|  | Inhalation IndTypeInh (5200)  | 🞎 Yes 🞎 No | *(If Yes →)*  | Sevoflurane IndAgentInhalSevo (5220) | 🞎 Yes 🞎 No |
|  |  |  |  | Isoflurane IndAgentInhalIso (5230)  | 🞎 Yes 🞎 No |
|  | Intravenous IndTypeIV (5240)  | 🞎 Yes 🞎 No | *(If Yes →)*  | Sodium Thiopental IndAgentIVSodT (5260) | 🞎 Yes 🞎 No |
|  |  |  |  | Ketamine IndAgentIVKet (5270) | 🞎 Yes 🞎 No |
|  |  |  |  | Etomidate IndAgentIVEtom (5280) | 🞎 Yes 🞎 No |
|  |  |  |  | Propofol IndAgentIVProp (5290) | 🞎 Yes 🞎 No |
|  |  |  |  | Fentanyl IndAgentIVFent (5300) | 🞎 Yes 🞎 No |
|  |  |  |  | Midazolam IndAgentIVMid (5310) | 🞎 Yes 🞎 No |
|  |  |  |  | Dexmedetomidine IndAgentIVDex (5320) | 🞎 Yes 🞎 No |
|  |  |  |  | Sufentanil IndAgentIVSuf (5330) | 🞎 Yes 🞎 No |
|  |  |  |  | Remifentanil IndAgentIVRem (5340) | 🞎 Yes 🞎 No |
|  | Intramuscular (IM) IndTypeIM (5350)  | 🞎 Yes 🞎 No | *(If Yes →)*  | Ketamine IndAgentIMKet (5370)  | 🞎 Yes 🞎 No |
|  |  |  |  | Midazolam IndAgentIMMid (5380) | 🞎 Yes 🞎 No |
| Regional Anesthetic RegionalAnes (5400) | 🞎 Yes 🞎 No |  |  |
|  | *(If Yes →)* | Regional Anesthetic Site: RegAnesSite (5410) | 🞎 Thoracic Epidural Catheter 🞎 Lumbar Epidural Catheter 🞎 Caudal Epidural Catheter🞎 Lumbar Epidural -Single shot 🞎 Caudal Epidural – Single shot 🞎 Lumbar Intrathecal -Single Shot 🞎 Other |
|  |  |  |  |  |  |  |
|  | *(If Yes →)* | Regional Anesthetic Drug:  | Bupivicaine RegAnesDrugBup (5420)  | 🞎 Yes 🞎 No | Bupivicaine/Fentanyl RegAnesDrugBupFen (5430)  | 🞎 Yes 🞎 No |
|  |  | *(Select all that apply)* | Clonidine RegAnesDrugClon (5440)  | 🞎 Yes 🞎 No | Fentanyl RegAnesDrugFen (5450)  | 🞎 Yes 🞎 No |
|  |  |  | Hydromorphone RegAnesDrugHydro (5460)  | 🞎 Yes 🞎 No | Lidocaine RegAnesDrugLido (5470)  | 🞎 Yes 🞎 No |
|  |  |  | Morphine RegAnesDrugMorph (5480)  | 🞎 Yes 🞎 No | Ropivicaine RegAnesDrugRop (5490)  | 🞎 Yes 🞎 No |
|  |  |  | Ropivicaine/Fentanyl RegAnesDrugRopFen (5500)  | 🞎 Yes 🞎 No | Tetracaine RegAnesDrugTetra (5510)  | 🞎 Yes 🞎 No |
|  |  |  |  |  | Other RegAnesDrugOth (5520) | 🞎 Yes 🞎 No |
|  |  |  |
|  | Intercostal Nerve Infiltration by Surgeon or Anesthesia: IntNerveInf (5530) | 🞎 Yes 🞎 No |
|  | Regional Field Block by Surgeon or Anesthesia:RegFieldBlock (5540) | 🞎 Yes 🞎 No |
| **ANESTHESIA Airway** |
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| Endotracheal Intubation Performed: 🞎 Yes 🞎 No*(If Yes ↓)* Intubate (1015)  |
|  | Intubation Date/Time: IntubateDT (1016)*(mm/dd/yyyy 00:00 – 23:59)* \_ \_ / \_ \_ / \_ \_ \_ \_ \_ \_:\_ \_ | Initial Extubation Date/Time: ExtubateDT (1017)*(mm/dd/yyyy 00:00 – 23:59)* \_ \_ / \_ \_ / \_ \_ \_ \_ \_ \_:\_ \_ |
|  | Extubated in OR: ExtubInOR (1018) 🞎 Yes 🞎 No |  |
|  | Re-Intubated After Initial Postoperative Extubation: 🞎 Yes 🞎 No*(If Yes ↓)* ReIntubate (1019)  |
|  |  | Final Extubation Date/Time: *(mm/dd/yyyy 00:00 – 23:59)* \_ \_ / \_ \_ / \_ \_ \_ \_ \_ \_:\_ \_ FinExtubDT (1020) |

Airway In-situ (ETT or Tracheostomy):  | 🞎 Yes 🞎 No |
| Airway Type:  | 🞎 No airway support 🞎 Simple face mask 🞎 Bag-mask 🞎 Nasal cannulae 🞎 Laryngeal Mask Airway (LMA) 🞎 Endotracheal intubation 🞎 Tracheostomy |
|  | (If LMA →) | Airway Size :  | 🞎 1.0 🞎 1.5 🞎 2.0 🞎 2.5 🞎 3.0 🞎 4.0 🞎 5.0 |
|  | (If Endotracheal intubation →) | Airway Size (mm):  | 🞎 2.5 🞎 3.0 🞎 3.5 🞎 4.0 🞎 4.5 🞎 5.0🞎 5.5 🞎 6.0 🞎 6.5 🞎 7.0 🞎 7.5 🞎 8.0 🞎 Other 🞎 Size not listed (DLETT, Tracheotomy)  |
|  |  | Cuffed  | 🞎 Yes 🞎 No |
|  | (If Endotracheal intubation or Tracheostomy→) | Airway Site:  | 🞎 Oral 🞎 Nasal 🞎 Tracheostomy |
| Endobronchial Isolation (DLETT, Bronchial Blocker)  | 🞎 Yes 🞎 No |  |
| ICU Type Ventilator Used Intraop  | 🞎 Yes 🞎 No |  |
| **ANESTHESIA Transfusion** |
| Transfusion 🞎 Yes 🞎 No Transfusion (5630) *(If Yes enter # of units or 0 if none ↓)* |
|  | Packed Red Blood Cells (PRBC)Units PRBCUnits (5660) | \_\_\_\_\_\_  |
|  | Platelet Pheresis Units PlateletsPheresis (5690) | \_\_\_\_\_\_  |
|  | Random Donor Platelet Units PlateletsDonor (5700) | \_\_\_\_\_\_ |
|  | Fresh Frozen Plasma (FFP) – Units FFPUnits (5730) | \_\_\_\_\_\_  |
|  | Cryoprecipitate – Units CryoUnits (5760) | \_\_\_\_\_\_  |
|  | Whole Blood – Units WholeBldUnits (5790) | \_\_\_\_\_\_  |
|  | Autologous Transfusion AutologousTrans (5800) | 🞎 Yes 🞎 No |
|  | Cell Saver/Salvage CellSavSal (5810) | 🞎 Yes 🞎 No |
|  | Directed Donor Units DirDonorUnits (5820) | 🞎 Yes 🞎 No |
| **ANESTHESIA Procoagulents** |
| Factor VIIa (Novoseven) mcg/kg- Dose 1 \_\_\_\_\_\_ProcoagFactorVIIa1 (5850)  |
| *(If Factor VIIa dose 1 > 0 →)* Factor VIIa (Novoseven) mcg/kg- Dose 2 \_\_\_\_\_\_ProcoagFactorVIIa2 (5860)  |
| *(If Factor VIIa dose 2 > 0 →)*Factor VIIa (Novoseven) mcg/kg- Dose 3 \_\_\_\_\_\_ProcoagFactorVIIa3 (5870)  |
| Prothrombin Concentrate units/kg- Dose 1 \_\_\_\_\_\_ProcoagProthrom1 (5880)  |
| *(If Prothrombin dose 1 > 0 →)*Prothrombin Concentrate units/kg- Dose 2 \_\_\_\_\_\_ProcoagProthrom2 (5890)  |
| *(If Prothrombin dose 2 > 0 →)*Prothrombin Concentrate units/kg- Dose 3 \_\_\_\_\_\_ProcoagProthrom3 (5900) |
| Fibrinogen Concentrate mg/kg- Dose 1 \_\_\_\_\_\_ProcoagFibrin1 (5910) |
| *(If Fibrinogen dose 1 > 0 →)*Fibrinogen Concentrate mg/kg- Dose 2 \_\_\_\_\_\_ProcoagFibrin2 (5920) |
| *(If Fibrinogen dose 2 > 0 →)*Fibrinogen Concentrate mg/kg- Dose 3 \_\_\_\_\_\_ProcoagFibrin3 (5930) |
| Antithrombin 3 Concentrate units- Dose 1 \_\_\_\_\_\_ProcoagAntithrom1 (5940) |
| *(If Antithrombin dose 1 > 0 →)* Antithrombin 3 Concentrate units- Dose 2 \_\_\_\_\_\_ProcoagAntithrom2 (5950) |
| *(If Antithrombin dose 2 > 0 →)*Antithrombin 3 Concentrate units- Dose 3 \_\_\_\_\_\_ProcoagAntithrom3 (5960) |
| Desmopressin (DDAVP) mcg/kg- Dose 1 \_\_\_\_\_\_ ProcoagDesmo1 (5970) |
| *(If DDAVP dose 1 > 0 →)*Desmopressin (DDAVP) mcg/kg- Dose 2 \_\_\_\_\_\_ProcoagDesmo2 (5980) |
| *(If DDAVP dose 2 > 0 →)*Desmopressin (DDAVP) mcg/kg- Dose 3 \_\_\_\_\_\_ProcoagDesmo3 (5990) |
| **ANESTHESIA Antifibrinolytics** |
| Epsilon Aminocaproic Acid (Amicar) Used  | 🞎 Yes 🞎 No AntifibEpUse (6000) |
| *(If Yes →)* | Epsilon Aminocaproic Acid (Amicar) Load mg/kg  | \_\_\_\_\_\_ mg/kg AntifibEpLoad (6010) |
|  | Epsilon Aminocaproic Acid (Amicar) Pump Prime mg/kg  | \_\_\_\_\_\_ mg/kg AntifibEpPrime (6020) |
|  | Epsilon Aminocaproic Acid (Amicar) Infusion Rate mg/kg/hr  | \_\_\_\_\_\_ mg/kg/hr AntifibEpInfRate (6030) |
| Tranexamic Acid Used  | 🞎 Yes 🞎 No AntifibTranexUse (6040) |
| *(If Yes →)* | Tranexamic Acid Load mg/kg  | \_\_\_\_\_\_ mg/kg AntifibTranexLoad (6050) |
|  | Tranexamic Acid Pump Prime mg/kg  | \_\_\_\_\_\_ mg/kg AntifibTranexPrime (6060) |
|  | Tranexamic Acid Infusion Rate mg/kg/hr  | \_\_\_\_\_\_ mg/kg/hr AntifibTranexInfRate (6070) |
| Trasylol (Aprotinin) Used | 🞎 Yes 🞎 No AntifibTrasylUse (6080) |
| *(If Yes →)* | Trasylol (Aprotinin) Load cc/kg  | \_\_\_\_\_\_ cc/kg AntifibTrasylLoad (6090) |
|  | Trasylol (Aprotinin) Pump Prime cc/kg  | \_\_\_\_\_\_ cc/kg AntifibTrasylPrime (6100) |
|  | Trasylol (Aprotinin) Infusion Rate cc/kg/hr  | \_\_\_\_\_\_ cc/kg/hr AntifibTrasylInfRate (6110) |
| **ANESTHESIA Intraoperative Pharmacology (including CPB)** IntraopPharm (6140) |
| Intraoperative Medications:  | 🞎 None *(If not None, select all intra-operative medications that apply: ↓)* |
| 🞎 | 5-HT3 Agents (e.g., Ondansetron) | 🞎 | Narcotic |
| 🞎 | Adenosine bolus | 🞎 | Nesiritide Infusion |
| 🞎 | Amiodarone  | 🞎 | Nicardipine Infusion |
| 🞎 | Bronchodilator - Inhaled | 🞎 | Nitric Oxide inhalation |
| 🞎 | Benzodiazepine | 🞎 | Nitroglycerin (Tridil) infusion |
| 🞎 | Calcium Chloride infusion | 🞎 | Nitroprusside (Nipride) |
| 🞎 | Calcium Gluconate infusion | 🞎 | Phenoxybenzamine bolus |
| 🞎 | Desflurane | 🞎 | Phentolamine (Regitine)  |
| 🞎 | Dexmetetomidine (Precedex) | 🞎 | Phenylephrine infusion |
| 🞎 | Dobutamine infusion | 🞎 | Procainamide |
| 🞎 | Dopamine infusion | 🞎 | Propofol (Diprivan) infusion |
| 🞎 | Epinephrine (Adrenalin) infusion | 🞎 | Prostaglandin infusion |
| 🞎 | Esmolol  | 🞎 | Sevoflurane |
| 🞎 | Fenoldopam infusion | 🞎 | Sodium Bicarbonate bolus |
| 🞎 | Furosemide  | 🞎 | Steroids IV/CPB (Hydrocortisone/Methylprednisolone/Dexamethasone) |
| 🞎 | Insulin  | 🞎 | Thyroid Hormone  |
| 🞎 | Isoflurane | 🞎 | Tromethamine (THAM) bolus |
| 🞎 | Isoproterenol infusion | 🞎 | Vasopressin infusion |
| 🞎 | Ketamine | 🞎 | Other Inotrope |
| 🞎 | Norepinephrine (Levophed) infusion | 🞎 | Other Vasodilator |
| 🞎 | Magnesium Sulfate  | 🞎 | Other Vasoconstrictor |
| 🞎 | Milrinone |  |  |
| **ANESTHESIA Pharmacology On Arrival To ICU/PACU** |
| Medications Given At Time Of Transfer: | 🞎 None (If not None, select all medications that apply: ↓) |
| 🞎 | Aminocaproic Acid (Amicar) infusion | 🞎 | Nesiritide Infusion |  |
| 🞎 | Amiodarone infusion | 🞎 | Nicardipine infusion |  |
| 🞎 | Aprotinin (Trasylol ) infusion | 🞎 | Nitric Oxide inhalation |  |
| 🞎 | Benzodiazepine infusion | 🞎 | Nitroglycerin (Tridil) infusion |  |
| 🞎 | Calcium Chloride infusion | 🞎 | Nitroprusside (Nipride) infusion |  |
| 🞎 | Calcium Gluconate infusion | 🞎 | Norepinephrine (Levophed) infusion |  |
| 🞎 | Dexmetetomidine (Precedex) infusion | 🞎 | Phentolamine (Regitine) infusion |  |
| 🞎 | Dobutamine infusion | 🞎 | Phenylephrine infusion |  |
| 🞎 | Dopamine infusion | 🞎 | Procainamide bolus/infusion |  |
| 🞎 | Epinephrine (Adrenalin) infusion | 🞎 | Propofol (Diprivan) infusion |  |
| 🞎 | Esmolol infusion | 🞎 | Prostaglandin infusion |  |
| 🞎 | Fenoldopam infusion | 🞎 | Thyroid Hormone infusion |  |
| 🞎 | Insulin infusion | 🞎 | Tranexamic Acid infusion |  |
| 🞎 | Isoproterenol infusion | 🞎 | Vasopressin infusion |  |
| 🞎 | Local Anesthetic infusion via catheter (On-Q, Pleural catheter) | 🞎 | Other Inotrope |  |
| 🞎 | Milrinone infusion | 🞎 | Other Vasodilator |  |
| 🞎 | Muscle Relaxant infusion | 🞎 | Other Vasoconstrictor |  |
| 🞎 | Narcotic infusion |  |  |  |
| **ANESTHESIA ICU/PACU Care** |
| Date and Time of ICU/PACU Arrival (mm/dd/yyyy 00:00 – 23:59) \_ \_ / \_ \_ / \_ \_ \_ \_ \_ \_:\_ \_ |
| Initial FiO2 | \_\_\_\_\_\_\_\_\_\_\_ | Mechanical circulatory support(ECMO/VAD)  | 🞎 Yes 🞎 No |
| ICU/PACU Arrival labsICUPACULabs | 🞎 Yes 🞎 No | (If Yes →) | pH: \_\_\_\_\_  | pCO2: \_\_\_\_\_  | pO2: \_\_\_\_\_  |
|  | Base Excess: \_\_\_\_\_  | Lactate: \_\_\_\_\_ | Hematocrit: \_\_\_\_\_ |
| Initial pulse oximeter \_\_\_\_\_ %  | Temperature on ICU/PACU Arrival: \_\_\_\_\_ ° C  |
| Temperature Measurement Site:  | 🞎 Forehead scan 🞎 Tympanic membrane 🞎 Skin 🞎 Rectal 🞎 Bladder 🞎 Oral 🞎 Axillary 🞎 Other |
| Need for Temporary Pacemaker on Arrival In ICU/PACU  | 🞎 Yes 🞎 No |  |
|  | (If Yes →) | Site of Temporary Pace Maker:  | 🞎 Epicardial 🞎 Transvenous |
|  | (If Yes →) | Type of Temporary Pacing:  | 🞎 Atrial 🞎 Atrio-ventricular 🞎 Ventricular 🞎 Other |
| Disposition Under Anesthesia: | 🞎 Discharged as planned after PACU/Recovery🞎 Admit to ICU as planned🞎 Other location not listed above | 🞎 Admit to hospital floor as planned🞎 Unplanned admit to hospital or ICU🞎 Patient expired under anesthetic management |
| Peri-Anesthetic Demise: (within 24 hr of last anesthetic end time) | 🞎 Yes 🞎 No |
| **ANESTHESIA Adverse Events** AnesAdvEvent (6380) |
| Anesthesia adverse events: | 🞎 None | *(If not None, select all adverse events that apply: ↓)* |
| 🞎 | Oral/Nasal Injury-Bleeding | 🞎 | Protamine Reaction |
| 🞎 | Respiratory Arrest | 🞎 | Cardiac Arrest - related to anesthesia care |
| 🞎 | Difficult Intubation/Reintubation | 🞎 | Cardiac Arrest - unrelated to anesthesia care |
| 🞎 | Stridor / Sub-glottic Stenosis | 🞎 | TEE related esophageal bleeding / rupture |
| 🞎 | Extubation | 🞎 | Esophageal Chemical Burn |
| 🞎 | Endotracheal Tube Migration | 🞎 | TEE related airway compromise |
| 🞎 | Airway Injury | 🞎 | TEE related extubation |
| 🞎 | Arrythmia - Central Venous Line Placement | 🞎 | Complications during patient transfer |
| 🞎 | Myocardial Injury - Central Venous Line Placement | 🞎 | Peripheral Nerve Injury due to positioning |
| 🞎 | Vascular Compromise - Central Venous Line Placement | 🞎 | Arterial Line Placement- Extremity ischemia |
| 🞎 | Pneumothorax - Central Venous Line Placement | 🞎 | Anesthesia Equipment Malfunction/ Failure |
| 🞎 | Vascular Access | 🞎 | Intravenous Infiltration |
| 🞎 | Hematoma requiring relocation of catheter placement | 🞎 | Integument Injury (skin breakdown or dehiscence, pressure ulcer or alopecia) |
| 🞎 | Arterial Puncture | 🞎 | Bronchospasm |
| 🞎 | Intravenous/Intra-arterial Air Embolism | 🞎 | Hemoptysis |
| 🞎 | Bleeding - Regional Anesthetic Site | 🞎 | Postop Nausea/Vomiting requiring admission |
| 🞎 | Intrathecal Puncture - Regional | 🞎 | Vomiting or Aspiration on Induction/Emergence  |
| 🞎 | Local Anesthetic Toxicity - Regional | 🞎 | Emergence Delirium requiring Medication |
| 🞎 | Neurologic Injury - Regional | 🞎 | Laryngospasm requiring medication |
| 🞎 | Anaphylaxis/Anaphylactoid Reaction | 🞎 | Unplanned need to remain intubated postprocedure due to anesthesia |
| 🞎 | Non-allergic Drug Reaction | 🞎 | Ocular Injury (corneal abrasion or injury) |
| 🞎 | Medication Administration | 🞎 | Pulmonary Hypertensive Crisis |
| 🞎 | Medication Dosage | 🞎 | Hypercyanotic Episode (Tet Spell) |
| 🞎 | Intraoperative Recall | 🞎 | Other |
| 🞎 | Malignant Hyperthermia |  |  |