Preop Assessment Notes

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Name: Allergies: Contact Precautions: Medications:	Age : Ht: Wt: BMI:	Name: Allergies: Contact Precautions: Medications:	Age : Ht: Wt: BMI:
Proposed surgery: Anticipated blood loss: Surgical / Medical notes:		Proposed surgery: Anticipated blood loss: Surgical / Medical notes:	
Previous Anesthetics: History of problems with anesthesis History of PONV or motion sicknes Last meal: Smoking history: Opioid / THC or Illicit drug use: Anticoagulants: Activity level (MET): Functional Inquiry: Medical Problems:		Previous Anesthetics: History of problems with anesthesia: History of PONV or motion sickness: Last meal: GER symptoms: Smoking history: ETOH use: Opioid / THC or Illicit drug use: Anticoagulants: Activity level (MET): Functional Inquiry: Medical Problems:	
Physical exam; general appearance - MP score: - TMD: - Neck ROM: - Mouth opening: - Cardiorespiratory exam: Investigations:	: Anticipated difficulties IV access: BMV: Intubation:	Physical exam; general appearance: - MP score: Anticipated dif - TMD: IV access - Neck ROM: BMV: - Mouth opening: Intubation - Cardiorespiratory exam: Investigations:	:
ASA class: Frailty Score: Special monitors: Antibiotic and or TXA Use: Anesthetic Plan: Postop pain management:	RCRI Score: STOPBANG Score:	ASA class: Frailty Score: RCRI Score: S Special monitors: Antibiotic and or TXA Use: Anesthetic Plan: Postop pain management: Image: Postop pain management:	STOPBANG Score: