## **Downtown Surgery Center Pre-Anesthesia Evaluation**

	Name				Weight	Height	M / F NPOp
Preop Diagnosis Type of Surgery/Procedure				Allergies	/Sensitivities		The state of the s
Surgical Da	te Surg	eon					
Past Surgic	al Hx						
				Medications			
					OFF ME		
Past Anesthesia Hx					SEE MEL	ICAHO	N LISTING
Past Medical	History and Review o	f Systems		Physic	cian Comments	s/Physical	Exam
Airway							
	Difficult Airways	☐ yes	no —				
TMJ		☐ yes	□ no			() His	
Cardiovascula		Писс	DI 200				
Chest Pain/Heart disease/Angina		☐ yes	no —				
Heart Attack/MI Heart Rhythm Problem		☐ yes ☐ yes	□ no				
High Blood Pressure		yes yes	□ no —				
Valvular Heart Disease/MVP		yes yes	no				
Pacemaker/AICD		☐ yes	no no				
Heart Failure		yes yes	no —				
Pulmonary		<b>—</b> yes					
Asthma		u yes	no			nere	
Tobacco Use/COPD		☐ yes	no —				
Renal	300/33. 3						
	alysis/Transplant	yes	no				
GI							
Heartburn	n/Reflux/Hiatal hernia	yes	□ no				
Hepatic							
Moderate/Heavy Alcohol use		yes	□ no —				
Jaundice/Hepatitis		☐ yes	no		owhere company course	LEG ED LIEUER	KE MEKE KORODS
Endocrine							
Diabetes Mellitus		yes	no —	ALL IN HOUSE PAR	MATERIAL PROPERTY OF THE PERSON OF THE PERSO	A Section	
Thyroid Disorders		yes	no no	title had de	nam tributable is to	CON SCIENCE	
Neurological			71	I MEDICAL GE			
Seizures		yes	□ no ——				
Stroke/TIA		yes	no	REAL DISTURBLE	Do persuau		
Orthopedic							
Arthritis (RA/OA)		yes	no —	a tiref and bear	COSE OF EURO SO SAVE	GE G LIBE DI	en eventeen
Back/Neck Injuries		yes	□ no		CONTRACTOR OF THE PROPERTY OF		
Other							
	od Transfusions	yes	no —			the state of	
Bleeding Problem Pregnant?		yes	no				
		yes yes	no no				
		LMP	di grandi, gita bir	air, and deal	There alles	a hara an	d hezerda are
Other	ger to a lettin tea	Maria Se	usen reem but	WELL DESCRIPTION	ne wane jujeni o	Casaphora	ন্তক্ষণীৰ বৃচ্চত
Anesthetic D	iscussion and Plan			negations, Trie	Airway	cheja nasjeni	at the this way
	on discussed including risk	s, complicati	ons including but not lim	nited to:			
ASA Class					MALAMPATTI 🔲 I 🗆		IV
□ 1				The same of the same of			
<b>2</b>	dental/airway injury				Dental Intac	t	☐ Caps/Crowns
<b></b> 3	allergic/drug reaction				Dona intac		_ 50,0,0,0,0,0
<b>4</b>							
5 death			and the second	☐ Dent	ures	☐ Bridges	
<b></b> 6	Possible blood and/o		uct transfusions				
□ E	use of invasive monit	oring lines					
	MD/Resident care				IT ACO	ADDD	ADDIATE
	Understanding stated	I/Questions a	nswered. Consent given		ILI ASC	APPRO	JERIALE
						The second second	THE RESERVE TO SERVE THE PARTY OF THE PARTY
Plan							