Appendix 5: Anaesthetist — discharge note

Patient ID: ____________________________ Date: ____________________________ Time: ____________________________

Patient history (summary):
(if possible refer to previous notes)

Status:
CNS: Level of consciousness: ____________________________ GCS: _____ VAS-score: ________
Pain treatment: □ Conventional □ Epidural analgesia____________________________________
Trial consent status/other:

Respiratory: Supplemental oxygen:______Oxygenation:_____ RR:______ Stethoscopy:_____________________
Blood-gas: pH:______, cause □ respiratory □ metabolic □ mix:______________________________
X-ray of thorax:________________________________________ □ None taken
Other:

Cardiovascular: BP:______ Heart rhythm:______________ Heart rate:______ Peripheral perfusion:______________
Stethoscopy:______________________________________ S\,VO$_2$:______ □ None taken
Volume status: □ normovolaemia □ hypovolaemia
Other:

Renal: Fluid balance:______________ Sodium:______ Potassium:______ Creatinine:_________
Hourly diuresis:_________
Hydration status: □ Normohydration □ Dehydration □ Overhydration
Volume in: ________ Out: ________

Abdominal: Nausea: □ Yes □ No. Bandage is dry: □ Yes □ No,___________________________
Gastric-tube: □ No □ Yes, ______ ml/24 hours. Bowel sounds: □ Yes □ No
Faeces: □ No □ Yes. Drain: □ No □ Yes, (describe)
Other:
□ See the surgeon’s note page:_____

Microbiological: Temperature:__________ WBC/CRP:______/______ Sepsis score:____ (cf. case report form page 17)
Antibiotics: □ Not given □ Empirically □ After culture □ Antibiotics not appropriate
Other:

Para-clinical: Haemoglobin:______ Coagulation:__________________ Diagnostic imaging/other:

Other:

Conclusion:
□ Stable □ unstable, give reason(s):___________________________

Other:

Are there any postoperative complications: □ No □ Yes, (describe):________________________________________

Some trial-sites use a dictation template with the same content because of technicalities
Appendix 5: Anaesthetist — discharge note

Plan:

CNS:
- Analgesia: 
  - Continue ordinations
  - Other:

- Epidural analgesia:
  - No
  - Yes, discontinue date_______ - _______
  - Other:

Other:

Respiratory:
- Treatments goals:
  - Oxygenation ≥ 94 %
  - Contraindication
  - Other:

- Pulmonary physiotherapy:
  - Continue ordinations
  - PEP-tube
  - CPAP
  - Other:

  - Physiotherapy frequency:____________________
  - Other:

Cardiovascular:
- Monitoring level:
  - BP/HR/SpO₂/RR ___ times per shift
  - Other:

- Treatment goals:
  - Blood pressure:_________ 
  - Heart rate:___________
  - Diuresis:_________ 
  - Other:

Renal:
- Fluid balance – next 24 hours:
  - Oral:________________________ ml 
  - IV.:________________________ ml 
  - IV.:________________________ ml 
  - RBC transfusion:________________ units

Abdominal:
- Nutritional plan:
  - (Within 24 hours)

  - Other:

  - See surgeon’s note page:_____

Microbiological:
- Antibiotics:
  - Continue ordinations

  - Other:

Cultures:

Para-clinical:
- Blood samples:
  - Daily haemoglobin, creatinine, sodium, potassium, bilirubin, platelets, WBC, CRP

  - Diagnostic imaging

Trial consent: (Remember name of legal representative if this option is used)

Others:

Title and Name:______________________________