ANESTHESIA CONSULT TEMPLATE

Vancouver Acute

Access:	 dial 54543 from VGH site (604 875 4543 from outside VGH) enter user ID followed by the # key enter facility code (VGH: 115 / UBCH: 114) followed by the # key enter work type: 105 followed by the # key enter patient number (MRN) followed by the # key enter 2 to begin dictation 		
Identification:	dictating a consult for pati	ll your name; if resident/fellow also add ent (spell name), MRN Additional copies to	
Introduction:	 #1 Patient age #2 Patient gender #3 Date consultation #4 Booked procedure #5 Date procedure 		
#6 Indication for procedure:	Elaborate history of current problem if relevant to the anesthetic		
#7 Peri-operative Considerations:			
#8 Allergies/Intolerances:			
#9 Medications:	Including 24 h opioid consumption		
#10 History:	 Past anesthetic history Social habits: Smoking; alcohol/drug abuse PMH/Systemic inquiry (exercise tolerance/level of functioning, aspiration risk, resp, CVS, other) 		
Physical:	#11 Wt: #12 Ht: #13 BP: #14 HR:	 #15 General impression: e.g. BMI/dist #16 Airway exam: #17 Resp exam: SpO₂ #18 CVS exam: #19 Remainder of the examination: 	ress/O ₂ /tubes/lines
#20 Laboratory Tests:	(available & ordered)		
#21 ASA Physical Status:	Class		
#22 Recommendations:	 preoperative optimization discussion anesthetic options & risks (note patient preferences if any) special postoperative management (e.g. iPACU/HAU/ICU) 		
#23 Fitness for procedure:	 This patient is presently a suitable candidate for anesthesia for the proposed procedure. or, is not presently optimized for anesthesia for the proposed procedure. This patient requires further workup as indicated under the recommendations, as well as final review of the results by an ACC anesthesiologist. or, will not be a suitable candidate for anesthesia for the proposed procedure by the booked date. The procedure will thus have to be deferred. This has been / will be discussed with the surgeon. 		
#24 Proposed Facility:	The procedure has been booked to be done at: VGH / UBCH - if UBCH: UBCH would / would not be an appropriate site for this patient/procedure.		
The final decision regarding anesthetic management will me made by the attending anesthesiologist on the day of the procedure.			

Enter 8 to end a report. The system will loop back to "report work type" for next dictation. When finished all dictation, exit system by entering *5. Hang up. (If you forget to exit with *5, your dictation access number will freeze, but will self correct in 15 minutes)