

PREOP PROGRAM  
QUALITY & SERVICE INDICATOR FORM

Today's Date: \_\_\_\_\_

Date of Surgery: \_\_\_\_\_

(Addressograph)

Anesthesia Evaluator: \_\_\_\_\_ Referring Clinic: \_\_\_\_\_

- Scheduled Appointment:  Yes  No
- Arrived ±30 Minutes of Appt. Time:  Yes  No
- Patient Triage Out:  Yes  No
- Patient Chart Available:  Yes  No  Ordered
- Time First Seen in Preop Clinic: \_\_\_\_\_ (military time)
- Time in Preop Program < 90 Minutes:  Yes  No

|                                     |
|-------------------------------------|
| <u>EVALUATOR</u><br>(military time) |
| TIME IN: _____                      |
| TIME OUT: _____                     |
| PT. LEVEL: _____                    |
| TEACH: Yes ( ) No ( )               |
| <u>TOTAL</u>                        |
| VISIT TIME IN: _____                |
| VISIT TIME OUT: _____               |

If No, cause of delay in Preop Program:

- No Chart
- Outside Records/Tests Did Not Arrive With Patient
- Time to Find Old/Recent:  ECG  Chest X-Ray  MUGA  PFT's
- ECHO  Stress Test  Lab Work
- Complex History, No H&P, Start From the Beginning for History
- Lab Order Problems/Changes  Call Resident
- Wait to Clear Patient's ECG
- Consult With Medical Director
- Medical Director Not Available, Find Appropriate Person
- Contact Outside Source for Additional Information
- Patient Arrived After 5:00 P.M.
- Patient Had Surgery Recently, Chart Not Available, Start All Over With Information
- Clinical Complication That Could Postpone or Cancel Surgery
- Language Barrier w/Interpreter  Language Barrier w/NO Interpreter
- Physical Disabilities
- Teaching
- Nursing Assessment Forms
- Solved Problems Unrelated to Anesthesia; explain: \_\_\_\_\_
- Cardiac Surgical Team Not Available

Comments: \_\_\_\_\_