

PT. NAME: _____ SURGERY DATE: 7/27/2008

STICKERS

SURGERY TYPE: _____

VITALS PRE-MED (mg) _____ MED: _____ TIME: _____

TIME: SAO2: HR: R: B/P: MAP: LOCAL ANESTHETIC x #Cart. Xylo (Green) 2% (1:50) x Xylo (Red) 2% (1:100) x Marc (Blue) 5% (1:200) x Septocaine 4% (1:100) x

SEE COMPUTER PRINTOUT FOR COMPLETE VITALS LIST TORADOL 1 (mg) TORADOL 2 (mg)

IV MEDS TIT TO CON SED: Table with columns for TIME, mg, and TOTAL RX_+.

FLAP(S): (check) 1-32 grid of checkboxes.

DISTAL WEDGE (teeth #) SUTURES: pife vikryl strap interrupted BARRICAID: UR UL LL LR

O-PLASTY OSTECT. (check) 1-32 grid of checkboxes.

EMDOGADN: (check) 1-32 grid of checkboxes.

BONE GRAFTS: (check) 1-32 grid of checkboxes.

BONE GRAFT NOTES: _____

NOTES: INDIVIDUAL TEETH _____

GENERAL NOTES: _____

Mouth Rinse: Periogard Assistant: S.S. Ice: Yes Ride: _____

The patient was alert and oriented after surgery. S.S. went over and gave P.O. info to and walked to their car.

Asst Sign _____ Dr. Sign _____

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IV MEDS TIT TO CON SED: TIME:mg T.A. TOTAL RX_+

FLAP(S): (check) 1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30 31 32

DISTAL WEDGE (teeth #) SUTURES: pte vicryl strap interrupted BARRICAID: UR UL LL LR

O-PLASTY/OSTECT. (check) 1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30 31 32

EMDOGAIN: (check) 1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30 31 32

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