**SAMPLE ANESTHETIC MONITORING FORM TEMPLATE**

|  |  |  |
| --- | --- | --- |
| Client ID: |  | Patient ID: |
| Date: |  | Species: | Breed: |
| Veterinarian: |  | Age: | Sex: |
| Veterinary Technician: |  | Weight: |
| Procedure: |  | Pre-op BW: | Yes |  | No |  |
| **Pre-surgical Examination Notes** |
|  |
|  |
| Pre-op Status: |  | Post-op Status: |  |
| **Intravenous Fluids** |
| Catheter size: |  | Location: |  |
| Fluid type: |  | Maintenance rate: | ml/hr |
| Surgery rate: | ml/hr | Total received: | mls |
| Start fluids:  |  | End fluids: |  |
| **Pre-Anesthetic Drugs** |
| Drug | Strength | Dose | Route | Time |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
| **Anesthetic Induction** |
| Drug | Strength | Dose | Route | Time |
|  |  |  |  |  |
|  |  |  |  |  |
| **Anesthetic Maintenance** |
| Agent used | Dose or concentration | Delivery method | ET Tube Size | Cuffed |
|  |  |  |  | Y |  | N |  |
| **Intra-operative Drugs** |
| Drug | Strength | Dose | Route | Time |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
| **Post-operative Drugs** |
| Drug | Strength | Dose | Route | Time |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
| **Time-based monitoring** |
| TIME |  |  |  |  |  |  |  |  |  |  |  |
| ISO% |  |  |  |  |  |  |  |  |  |  |  |
| O2 |  |  |  |  |  |  |  |  |  |  |  |
| Temp |  |  |  |  |  |  |  |  |  |  |  |
| Pulse |  |  |  |  |  |  |  |  |  |  |  |
| RR |  |  |  |  |  |  |  |  |  |  |  |
| MM |  |  |  |  |  |  |  |  |  |  |  |
| CRT |  |  |  |  |  |  |  |  |  |  |  |
| BP |  |  |  |  |  |  |  |  |  |  |  |
| Other |  |  |  |  |  |  |  |  |  |  |  |
| **Surgical notes** |
|  |
| Start Anesthetic: |  | End Anesthetic: |  |
| Start Surgery: |  | End Surgery: |  |