RECOVERY ROOM RECORD
NAVMED 6320/16 (REV. 11-77) S/N 0105-LF-206-3281

OPERATION PERFORMED	AGENTS AND TECHNICS OF ANESTHESIA

HOURS(S)	15	30	45		15	30	45		15	30	45			
TEMPS: ●PULSE CVP: X B.P. 220														
200														
180														
160														
140														
120														
100														
80														
60														
40														
20														
RESP. RATE →														
NUMBERS FOR REMARKS														

OXYGEN THERAPY

ROUTE	L/M	%	ON	OFF
MASK				
T-BAR				
VENTILAT.				

FLUID THERAPY

TYPE	5%	BLOOD	SALINE	OTHER
OPERATING ROOM				
RECOVERY ROOM				
TOTAL				

BLOOD LOSS IN OR: _____ CC

WARD PRE-OP B / mmHg

TUBES: ☐ N/G ☐ FOLEY

IV IN _____ c — _____ cc
OF _____ AT _____ cc/hr

IV IN _____ c — _____ cc
OF _____ AT _____ cc/hr

ART. LINE IN _____

T-TUBES, HEMOVAC IN _____

ADMISSION	DISCHARGE
FROM MOR/SPEC. STUDY	TO WARD _____
DATE _____ HRS _____	DATE _____ HRS _____
DRESSINGS: LOCATIONS	
STATUS:	STATUS
ENDOTRACHEAL TUBE - ORAL OR NASAL	
☐ YES ☐ NO	☐ YES ☐ NO
AIRWAY	
☐ CLEAR ☐ PLAST AIRWAY ☐ OBSTRUCTS EASILY	STATUS:

URINARY OUTPUT

TIME							
CC							
TOTAL							
SP, GR							
S/A							

REMARKS *(AS NUMBERED)* AND PERTINENT PATIENT PROGRESS NOTES

(COND'T ON REVERSE)

NAUSEA AND VOMITING: ☐ NO ☐ YES → 1 2 3 4 5 6 TIMES

CAUDAL, SPINAL, OR EPIDURAL BLOCK
MOVEMENT PRESENT AT _____ HRS
SENSATION PRESENT AT _____ HRS

CONDITION ON TWO: ☐ GOOD ☐ FAIR ☐ POOR ☐ CRITICAL

POST-ANESTHESIA RECOVERY SCORE (ALDRETE SCORE)			A	D
Able to move 4 extremities voluntarily or on command	2	Activity		
Able to move 2 extremities voluntarily or on command	1			
Able to move 0 extremities voluntarily or on command	0			
Able to deep breathe and cough freely	2	Respiration		
Dyspnea or limited breathing	1			
Apneic	0			
BP±20% of prenesthetic level	2	Circulation		
BP±20-50% of preanesthetic level	1			
BP±50% of preanesthetic level	0			
Fully awake	2	Consciousness		
Arousable on calling	1			
Not responding	0			
Pink	2	Color		
Pale, dusky, blotchy, jaundiced, other	1			
Cyanotic	0			
		TOTALS		

RECOVERY:
☐ COMPLICATED
☐ UNEVENTFUL

PATIENT'S IDENTIFICATION

SIGNATURE OF RECEIVING AND RELEASING OFFICERS

AOW

TOW

NAVMED 6320/16 (BACK)

HOURS(S)	15	30	45		15	30	45		15	30	45		15	30	45		15				
TEMPS: ●PULSE CVP:																					
220																					
200 ╳B.P.																					
180																					
160																					
140																					
120																					
100																					
80																					
60																					
40																					
20																					
RESP. RATE →																					
NUMBERS FOR REMARKS																					

MEDICATIONS

TIME	DRUG	DOSE	ROUTE	NURSE

REMARKS *(AS NUMBERED)* AND PERTINENT PATIENT PROGRESS NOTES (CON'T FROM FRONT)