

MS3 Adult Day Surgery-Anesthesia led Transfer Checklist

Prior to Transfer to MS3 from the OR, a patient must meet the following requirements:

Phase 1 Discharge Criteria

- Patient's cough, gag and swallowing reflexes are intact or returned to pre-operative state
- Patient is awake, oriented and able to communicate needs or has returned to pre-operative level of consciousness
- Patient's blood pressure is within +/- 20% of pre-operative value
- Patient's oxygen saturation on room air is greater than 92%, or returned to preoperative state. If oxygen is required, the attending anesthesiologist/delegate provides an order for supplemental oxygen
- Patient's temperature is between 36-37.5 °C oral
- Patient verbalizes that pain is at a tolerable level and at least 15 minutes have elapsed since the last dose of parenteral narcotic
- Post-operative nausea/vomiting has been treated with anti-emetics and is currently not excessive
- Fifteen minutes has elapsed following administration of the first dose of any intravenous medication and following the initiation of any blood product.
- At least one hour has elapsed following the discontinuation of any infusion of vasoactive/inotropic medication
- Following a spinal or epidural anesthetic (not including an epidural placed for post-operative pain relief):
 - Sensory block has regressed at least one sensory level (dermatomes) from the intraoperative state
 - Sensory block is at the dermatome level of T10 or lower and some movement of the lower extremity returns (minimum Bromage score of 2-only able to move both feet)
 - Patient tolerates the head of the bed elevated to 30 degrees without hypotension or headache
- The Surgical team has examined any wounds/drains and are happy with bandages and drain output at least 15 minutes post-extubation

Required Documentation and Communication:

- Surgery orders including IV infusion, medications (pain, anti-emetics, antibiotics, etc), VTE prophylaxis, discharge instructions (re: dressing +/- drain), prescriptions, and follow-up appointments have been documented in the chart
- Accurate vital signs (BP, HR, O2 Sat) have been documented on the anesthetic record until the time of transfer to MS3
- Anesthesia has documented on the anesthetic record that "Phase 1 recovery Criteria met" prior to transfer
- Anesthesia to contact PACU charge nurse and notify them that patient meets Phase 1 recovery criteria
 - PACU Charge nurse will direct patient flow
- Anesthesia will accompany the Patient to MS3 and give face to face handover to MS3 Nurse