

ANESTHESIA GENERIC SCREENS

The criteria and elements will be determined by the MEC at ABC Surgery Center

CRITERIA	ELEMENTS	EXCEPTIONS	INSTRUCTIONS/DEFINITIONS
1	Need to intubate or reintubate following surgery	A. None	Report chart # for physician review.
2	Cardiac/respiratory arrest, use of respirator or Ambu for life support	A. None	Report chart # for physician review.
3	Patient recall of surgery while under general anesthesia	A. None	Review record for documentation of recall, report chart # for physician review.
4	Perioperative myocardial infarction within 72 hours of surgery	A. None	Screen record and complication/infection survey for documentation of MI, abnormal EKG, angina, chest pain requiring hospitalization. Report chart# for physician review.
5	Requirement of attendance of an anesthesiologist for a complication occurring during a local case without anesthesia standby	A. None	Screen record for documentation, report chart # for physician review.

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6	Aspiration during anesthesia delivery or in the recovery area	A. None	Screen record for documentation, report chart # for physician review.
7A	Preoperative assessment 7A Abnormal/absent results in lab work	A. Local or regional cases. B. CBC within one month if no change in condition. C. Abnormal results in any lab test, if documentation of MD notified (and follow-up) or MD initialled lab sheets. D. K+ > 6 with lab document of hemolysis. E. U/A – absence of report on diabetics with BS > 200 or if ordered by MD.	Report chart # Abnormality in any lab test not meeting the following exceptions: <ul style="list-style-type: none"> ▪ CBC older than one month. ▪ Patients with HGB ≤ 10. ▪ Patients with K+ > 6 or < 3.5. ▪ Absence of K+/SMA4 for general patient only receiving K+ depleting antihypertensive drug or diuretics (see list). ▪ BS < 60 or > 200 ▪ U/A – absence of report on diabetics with BS > 200 or if ordered by MD.
7B	Abnormal EKG	A. All local cases. B. Documentation of notification of MD and follow-up of instructions. C. Previous EKG within 6 months if stable and no change in condition.	Report chart # Absence of EKG on all patients 40 years or older (sample of tracing and interpretation prior to surgery). Report stating evidence of MI, ischemia, abnormal rhythms including: <ul style="list-style-type: none"> ▪ bradycardia < 50 ▪ tachycardia > 120 ▪ multifocal beats ▪ PVCs > 8/min. ▪ atrial fib/flutter Recorded abnormal EKG or clinical correlation suggested.

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7C	Abnormal V/S	<p>A. Problem addressed and resolved or record explains why not resolved.</p> <p>B. Documentation of MD notified (follow-up).</p>	<p>Report chart #</p> <p>B/P age 11 or older – systolic BP < 100mm Hg</p> <p>B/P age 10 or younger – systolic BP < 80mm Hg</p> <p>Documentation of MD notified (follow-up) required for the following:</p> <ul style="list-style-type: none"> ▪ Age 11 or older, HR < 50 (45 if on beta blocker) or HR > 120. ▪ Age 10 or younger, HR < 75 or HR > 160. ▪ Temperature > 101° (oral).
8	Operative assessment	<p>A. Local cases.</p> <p>B. Appropriate and timely interventions for significant deviations or adequate explanations.</p>	<p>Report chart #</p> <ul style="list-style-type: none"> ▪ B/P > 180 systolic or > 110 diastolic for more than 15 min. ▪ B/P < 85 systolic or < 40 diastolic for more than 15 min. ▪ Pulse > 160 for more than 5 min. ▪ Pulse < 45 for more than 5 min. ▪ O₂ sat < 90 for more than 3 min. ▪ CO₂ > 55 or < 25.
9	Postoperative assessment	<p>A. Appropriate and timely intervention with resolution or note that was MD notified.</p>	<p>Report chart #</p> <ul style="list-style-type: none"> ▪ B/P – 3 readings outside norms listed below with no effect from Rx.

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9 (cont.)			<ul style="list-style-type: none"> ○ Aged 11 or older BP < 85/50 or > 180/110. ○ Aged 10 or younger BP < 80/40 or > 150/100. ▪ Heart rate <ul style="list-style-type: none"> ○ Aged 11 or older < 50 (45 if on beta blocker) or > 130. ○ Aged 10 or younger < 70 or > 160. ▪ Documentation of respiratory difficulty, observance of hypoxia requiring anesthesiologist's attendance. <ul style="list-style-type: none"> ○ SaO₂ < 90% lasting > 1 min. ○ Respiratory stridor.
10	Death following surgery	A. Death occurring > 48 hours from time of surgery.	Report chart # Screen MSC chart and complication/infection survey for documentation of death.
11	Insulin dependent diabetic (general anesthesia only)	A. Patient receiving < 30 units of insulin.	Report chart # Patients receiving 30 units or more of insulin.
12	Cancellations	A. Patient scheduled for surgery but surgery cancelled prior to admission. <ul style="list-style-type: none"> ▪ Earlier than 24 hours prior to surgery. 	Report chart # Screen MSC chart.

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12 (cont.)		<ul style="list-style-type: none"> ▪ As a result of uncontrolled disease process. ▪ Patient not a candidate for outpatient surgery. ▪ Power/equipment failures. 	
13	Unusual occurrence reports	A. Staff at Melville Surgery Center unaware of incidence.	Report chart # Screen chart and attach report to complication survey.