Appendix C - POSTOPERATIVE EVALUATION

Surgery Canceled: Airway related:	Yes Yes	No No	If yes, wh	ıv?	Anesthesia relate	d:	Yes	No	
MASK VENTILATION	103	140	11 y C S, W11	·y :					
SpO ₂ Breathing room ai	r·		%		SpO ₂ Breathing 100%	/ ovvaon:			%
Attempted?	٠		Yes	No	SpO ₂ breathing 100 /	o oxygen.			/0
•		Madarata			Cavana		Cutus		
Mild (require oral/nasal airway)	Moderate (c	Can ventilate with as		Severe (Cannot ventilate w	ith facemask)	Extre	ITTIE (Cannot ventilate	with supraglottic device
Difficult?			Yes	No					
If yes, why?									
Successful?			Yes	No					
SUPRAGLOTTIC AIRV	VAY DE	VICE							
Attempted?	IAI DE	VICE	Yes	No	Number of attempts?)			
Type: LMA / Fastrach	/ ProSe	al / I T / I T ₋ Sı							
Difficult?	711000		Yes	No	bor con coar / amba	, lara Orioc	, 12, ()	outer <u>.</u>	
If yes, why?									
yoo,y									
Successful?			Yes	No					
DIRECT LARYNGOSC	OPY								
Attempted?			Yes	No	Number of attempts?	•			
Type of blade(s):					•				
Circle best grade viewe		ryngeal manip	ulation:						
Grade 1		Grade 2		Grade	2B Grad	de 3		Grade 4	
Grade		Grade 2		Grade				Grade +	
				~	$\gamma \sim$	\rightarrow			
View of most of the		Partial view of	the	View of ary	tenoids Epigloti	tis only		Neither epiglottis	
glottis Difficult?		cords	Yes	No				glottic opening vis	ibie
If yes, why?									
yoo,y									
INTUBATION									
Attempted?			Yes	No	Number of attempts?)			
Difficult?			Yes	No	•				
If yes, why?									
Successful direct laryng	oscopy?)	Yes	No					
Alternative methods: (C	irala all t	hat annly; incl	udo numbor /	of attampte	for each: indicate if u	and for too	obina	nurnacea)	
Alternative methods: (C				-					
Nasal Fiberoptic Bougie			Frova/Aintree	C		_ Awake			
Bonfils/Shikani					e				
GlideScope						Retroa	rade		
Other:									
Successful?			Yes	No					
SURGICAL AIRWAY									
Attempted?			Yes	No	Emergent / Elective	е			
Difficult?			Yes	No	Number of attempts?				
If yes, why?			. 55			-			
Successful?			Yes	No					
EXTUBATION			100	110					
Location:			OR	DACH	Othor:				
					Other:				
Reintubation required? Complications?			Yes	No					
Registered difficult airwater Location: Date:	ay with N	Medic Alert? Evaluation	Yes Completed b	No	Not Applicable				
Location: Date: Hermann		Evaluation	completed t	y.	l l	i	RB NI	UMBER: HSC	-MS-07-0144

LBJ

IRB NUMBER: HSC-MS-07-0144
IRB APPROVAL DATE: 7/25/2008