

Blood biochemistry test: Alb () Cr(E) () Other abnormality_____

Preoperative monitoring (LiDCO)

	Baseline	Passive leg raising	Deep slow breathing (1min)	End
Time				
Heart Rate				
Blood pressure				
Note		$\Delta SV = \%$		

Intraoperative Record

Time		SBP	DBP	MAP	HR	SpO ₂				
	Baseline						Vasopressor	Note	MAC	BIS
	Start of induction									
	2min									
	4min									
	6min									
	Intubation /0min									
	2min									
	4min									
	6min									
	8min									
	10min									
	12min									
	14min									
	16min									
	18min									
	20min									
	Incision /0min									
	+3min									
	+6min									

	+9min									
	+12min									
	+15min									
	+18min									
	+21min									
	+24min									
	+27min									
	+30min									
	End of surgery									
PIH	1 Yes <input type="checkbox"/> 1 <input type="checkbox"/> SBP<90mmHg; 12 <input type="checkbox"/> MAP<65mmHg; 13 <input type="checkbox"/> MAP decline≥30%Baseline; 0 No <input type="checkbox"/>									
Early Intraoperative hypotension	1 Yes <input type="checkbox"/> 1 <input type="checkbox"/> SBP<90mmHg; 12 <input type="checkbox"/> MAP<65mmHg; 13 <input type="checkbox"/> MAP decline≥30%Baseline; 0 No <input type="checkbox"/>									
Drugs	Induction dosing	Maintenance dosing	Total							
Sevoflurane	/	MAC:	/							
Propofol										
Etomidate										
Dexmedetomidine										
Midazolam										
Fentanyl										
Remifentanyl										
Oxycodone										
Rocuronium										
Lidocaine										
Ephedrine										
Phenylephrine										
Atropine										
Norepinephrine										
Epinephrine										
Esmolol										
Urapidil										
Others										

Date of surgery		Name of surgery	
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Combined nerve block	<input type="checkbox"/> Yes <input type="checkbox"/> No
Output volume	Urine _____ml; Blood loss _____ml Others _____ml
Transfusion volume	Crystalloid fluid _____ml; Colloid fluid _____ml
Intraoperative blood transfusion	<input type="checkbox"/> Yes <input type="checkbox"/> Whole blood _____ml <input type="checkbox"/> RBC_____U <input type="checkbox"/> Platelet _____U <input type="checkbox"/> Fresh frozen plasma ____ml <input type="checkbox"/> Autotransfusion _____ml <input type="checkbox"/> No
Operation time	
Aneasthesia time	
Duration of stay in PACU	_____min Event: Rescue medications: <input type="checkbox"/> NSAIDs <input type="checkbox"/> Opioids <input type="checkbox"/> Ondansetron <input type="checkbox"/> Others
Stay in ICU	<input type="checkbox"/> Yes Mechanical ventilation time _____ h ICU staying time _____h <input type="checkbox"/> No

Postoperative complications (within 30 days)

Respiratory system	
No <input type="checkbox"/> ;	
Yes <input type="checkbox"/> : <input type="checkbox"/> Mechanical ventilation time \geq 48 小时; <input type="checkbox"/> ARDS; <input type="checkbox"/> Pleural effusion; <input type="checkbox"/> Atelectasis; <input type="checkbox"/> Pulmonary infection; <input type="checkbox"/> Pneumothorax; <input type="checkbox"/> Aspiration pneumonia; <input type="checkbox"/> PE; <input type="checkbox"/> Others _____	
Cardiovascular system	
No <input type="checkbox"/> ;	
Yes <input type="checkbox"/> : <input type="checkbox"/> Non-fatal cardiac arrest; <input type="checkbox"/> ACS; <input type="checkbox"/> Acute congestive heart failure; <input type="checkbox"/> Arrhythmias (requiring treatment); <input type="checkbox"/> New-onset hypertension; <input type="checkbox"/> New-onset hypotension; <input type="checkbox"/> Others _____	
Urinary system	
No <input type="checkbox"/> ;	
Yes <input type="checkbox"/> : <input type="checkbox"/> AKI; <input type="checkbox"/> UTI; <input type="checkbox"/> Acute urinary retention; <input type="checkbox"/> Others _____	
Digestive system	
No <input type="checkbox"/> ;	
Yes <input type="checkbox"/> : <input type="checkbox"/> Intestinal obstruction; <input type="checkbox"/> Peritonitis; <input type="checkbox"/> GIB; <input type="checkbox"/> Hepatic dysfunction; <input type="checkbox"/> Anastomotic fistula; <input type="checkbox"/> Others _____	
Nervous system	
No <input type="checkbox"/> ;	
Yes <input type="checkbox"/> : <input type="checkbox"/> Ischemic stroke; <input type="checkbox"/> UTI; <input type="checkbox"/> Acute urinary retention; <input type="checkbox"/> Others _____	
Hematologic system	
No <input type="checkbox"/> ;	
Yes <input type="checkbox"/> : <input type="checkbox"/> DVT <input type="checkbox"/> RBC transfusion \geq 4U within 72 hours after surgery; <input type="checkbox"/> Others _____	
Infection	
No <input type="checkbox"/> ;	
Yes <input type="checkbox"/> : <input type="checkbox"/> Sepsis; <input type="checkbox"/> Wound infection; <input type="checkbox"/> GIB; <input type="checkbox"/> Others _____	
Clavien-Dindo classification	
<input type="checkbox"/> Grade I	Any deviation from the normal postoperative course without the need for pharmacological treatment or surgical, endoscopic or radiological interventions. <input type="checkbox"/> anti-emetics <input type="checkbox"/> antipyretics <input type="checkbox"/> analgesics <input type="checkbox"/> diuretics <input type="checkbox"/> electrolytes <input type="checkbox"/> physiotherapy <input type="checkbox"/> wound infections opened at the bedside
<input type="checkbox"/> Grade II	Requiring pharmacological treatment with drugs other than such allowed for grade I complications.
<input type="checkbox"/> Grade III	Requiring surgical, endoscopic or radiological intervention <input type="checkbox"/> IIIa: Not under general anaesthesia; <input type="checkbox"/> IIIb: Under general anaesthesia
<input type="checkbox"/> Grade IV	Life-threatening complication (including central nervous system complications) requiring critical care. <input type="checkbox"/> IVa: Single organ dysfunction (including dialysis); <input type="checkbox"/> IVb: Multi-organ dysfunction
<input type="checkbox"/> Grade V	Death of a patient.

Death	No <input type="checkbox"/> ; Yes <input type="checkbox"/> : POD ____ Cause: _____
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