

# **ANESTHESIOLOGY HANDOVER CHECKLIST**

## **Identification**

Name (goes by)  
Language spoken

## **Situation**

Diagnosis  
Surgical Procedure (Elective, Emergent)  
Type of Anesthesia

## **Background**

Age  
Weight  
Allergies/Precautions  
Baseline condition  
Medical history

## **Anesthesia**

Airway (bite block)  
Positioning  
Lines  
Medications (Antibiotic redosing)  
IV fluids  
Blood products (agreeable or not, given)  
Fluids out (EBL, U/O)

## **Surgical**

Surgical course  
Complications and interventions

## **Assessment**

Hemodynamic stability and goals  
Intraoperative events  
Current management (paralysis)  
Anesthetic record up to date (IV fluids, infusions)

## **Recommendation**

Tasks to do  
Postoperative management plan  
Pain management plan  
Postop orders and investigations