

# Anes – PACU Verbal Handoff

**Trial beginning 1/19/17**

- 1 Patient Name**  
**Check ID bands together**
- 2 Allergies**
- 3 Past Medical History**
- 4 Home Meds**
- 5 Pre-op Meds**
- 6 IV Access**
- 7 Type of Anesthetic**  
**Airway**  
**Relaxant, reversal**
- 8 Antibiotics**
- 9 Narcotics**
- 10 Antiemetics**
- 11 Is and Os, EBL**
- 12 Intra-op problems? Other meds?**
- 13 Post-op concerns**
- 14 What questions do you have?**