

Date of surgery _____ Incision time: _____ Return to NICU time: _____

Class I Class II

Procedure done: _____

Temperature:

last before moving to OR (axillary) _____

temperatures recorded in OR _____

post-op temp on arrival to NICU _____

Antibiotics:

on antibiotics for infection

antibiotics given pre-op (list)

_____ time started _____ date/time dc'd _____

_____ time started _____ date/time dc'd _____

_____ time started _____ date/time dc'd _____

no antibiotics given

Glucose:

Last pre-op glucose _____ time done _____

Intra-operative glucose _____ time done _____

First post-op glucose _____ time done _____

Pain Management:

Marcaine given intraoperatively time _____

Last intra-operative analgesic given: _____ time _____

Fentanyl

Morphine

Other _____

First post-op analgesic agent _____ time _____

Fentanyl

Morphine

Tylenol

Other

Infection:

Wound culture done Date/time: _____

Reason for wound culture: _____

Results of wound culture

SSI: Yes No