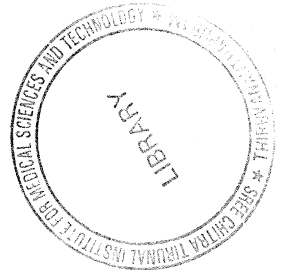


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SREE CHITRA TIRUNAL INSTITUTE FOR MEDICAL SCIENCES  
&  
TECHNOLOGY,  
THIRUVANANTHAPURAM, KERALA, INDIA - 695011.



**WORK BOOK**

**LIST OF PROCEDURES DONE**

**DIPLOMA IN OPERATION THEATRE TECHNOLOGY**


**DEPARTMENT OF ANAESTHESIOLOGY**

**NAME : SUMESH.T.M**

**MONTH AND YEAR OF SUBMISSION : NOVEMBER 2006**

# CERTIFICATE

I .....**SUMESH : T.M**..... hereby declare that I have performed all the procedures listed/carried out the project under report.

Signature ..........

Name .....**SUMESH : T.M.**.....

Place: Thiruvananthapuram

Date : **28.11.2006**

Forwarded , He has carried out the. minimum requirement of Procedures etc .

Signature..........

Head Of The Department , Anaesthesiology  
SCTIMST, Thiruvananthapuram.

## ACKNOWLEDGEMENT

*First and foremost I would like to thank the Head Of The Department Of Anaesthesia Prof R C Rathod and all other faculty members of the department who guided through the different phases of studies and encouraged and helped me in all aspect of my training.*

*I thank the Director of the Institute Dr K Mohandas, Dean Dr K Radhakrishnan and Registrar Dr A V George for their valuable advice, help and attention towards me.*

*I express my gratitude to Mr K Vijayakumar The Head Of The Department Of Biomedical Engineering for his precious advice which helped me for the successful completion of the course . I am also thankful to all other faculty members of the department who helped and encouraged me in technical studies.*

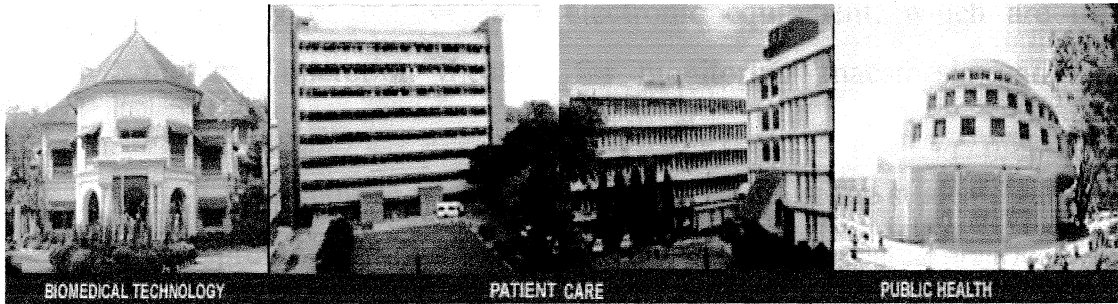
*I extended my grateful thanks to all technical staffs, especially Scientific Assistant Mrs K V Bhuvaneshwary for their timely guidance and ideas that helped to learn more . I am also grateful to all the PG students of the department of Anaesthesia .*

*I am also thankful to all my friends who helped during the study of the institute and the patients who were the core medium of the study.*

*At last I would like to acknowledge my sincere thanks to my seniors Mr Damodara Sarma and Mrs Mumthas and my juniors Mr Vipin and Mrs Manju for their co-operation in the work places and in the studies. I also thank all other colleagues, technical and service personnel and well wishers who helped me in all the way during the last two years of my study.*

**Sumesh T M**

**SREE CHITRA TIRUNAL INSTITUTE FOR MEDICAL SCIENCES  
& TECHNOLOGY (SCTIMST), THIRUVANANTHAPURAM,  
KERALA, INDIA.**



The Sree Chitra Tirunal Institute for Medical Sciences & Technology (SCTIMST), Thiruvananthapuram is an Institute of National Importance established by an Act of the Indian Parliament. It is an autonomous Institute under the administrative control of the Department of Science and Technology, Government of India.

The Institute signifies the convergence of medical sciences and technology and its mission is to enable the indigenous growth of biomedical technology, besides demonstrating high standards of patient care in medical specialties and evolving postgraduate training programs in advanced medical specialties, biomedical engineering and technology, as well as in public health.

It has a 239-bedded hospital for tertiary care of cardiovascular and neurological diseases, a biomedical technology wing with facilities for developing medical devices from a conceptual stage to commercialization, and a center of excellence for training and research in public health.

The Institute has the status of a University and offers postdoctoral, doctoral and postgraduate courses in medical specialties, public health, nursing, basic sciences and health care technology. It is a member of the Association of Indian Universities and the Association of Commonwealth Universities.

## THE COURSE

Diploma in Operation Theatre Technology (DOTT) Started by the Institute in the year 1992 under the great vision of Dr. K. Mohandas, The Director of this Institute.

This course enables the students in the operation and maintenance of variety of medical and electronic equipment, which are used in modern operation theaters for monitoring anaesthesia and surgical purposes.

The course concentrating on the skills of the students gained from their previous studies and improving them by repeated practice with the experienced anaesthetic team, makes a perfect technician fit for all emergency situations.

### **Qualification Educational**

A Diploma in Electronics/ Instrumentation/ Bio Medical Engineering with good academic record.

### **Duration**

Two Calendar Years.

### **Admission**

Through Common Entrance Test (CET) and Interview

## SYLLABUS

### COURSE CONTENTS

1. Basic Anatomy and Physiology of Human body.
2. Drugs used in anaesthesia/ Basic Pharmacology.
3. Principles of anaesthesia and intra operative care of the patient
4. Equipment used in anaesthesia its basic principles, uses, troubleshooting and maintenance.
5. Monitoring Equipment

6. Principles and Techniques of Sterilization.
7. Transfusions and Infusions.
8. Medical gases and the Hospital pipeline system including vacuum suction and oxygen concentrator.

#### **A. OPERATION THEATRE TRAINING – 15 MONTHS**

1. Preparation of anaesthesia machines, ventilators, and other equipments used in anaesthesia and monitoring, electro caurtery, operating microscopes, operation tables and lights.
2. Preparation of drugs used intraoperatively and the setting up of intravenous infusion/ transfusion.
3. Sterilization of the equipment used in anaesthesia such as ventilator tubing, transducer, tracheal intubating equipments (excluding surgical equipments)
4. Maintenance of theatre equipments (excluding surgical instruments) gas and vacuum outlets, theatre lights and cables etc.
5. Managerial aspects such as stock maintenance, preparation of indents, maintenance of the narcotic drug register etc.
6. Hospital pipeline systems and gas manifold including compressed air and vacuum.

#### **B. BIO MEDICAL ENGINEERING 8 MONTHS (4 MONTHS EACH YEAR OF TRAINING)**

During this period division of bio medical engineering will train the candidates in maintenance of the theatre equipments, hospital pipeline systems, gas manifolds, vacuum outlets, theatre lights, and table and electro caurtery.

#### **C. CSSD 1 MONTH**

Candidates will be posted under the Nursing Supervisor CSSD for training in all aspects of sterilization of the equipments (including surgical instruments) used in operation theatre.

D. 24 hours resident duty in the hospital for training in emergency surgical procedures and gas pipeline emergencies.

## **ANAESTHESIA: GIFT TO MANKIND**

### **INTRODUCTION TO ANAESTHESIA**

The term anaesthesia is a Greek derived noun used to define state of insensibility or loss of sensation with or without loss of consciousness. Dr. Oliver Wendell Holmes coined the term in 1846. Anaesthesia provides a better surgical access with less or no pain.

### **DEFINITION OF ANAESTHESIA**

Anaesthesia may be defined as a state in which as a result of drug induced unconsciousness, noxious stimuli can neither be perceived nor recalled

### **TYPES OF ANAESTHESIA**

The main classification of anaesthesia includes General Anaesthesia (GA) and Regional Anaesthesia (RA).

### **REGIONAL ANAESTHESIA**

It includes the loss of sensation of a particular region without loss of consciousness. The major types of Regional Anaesthesia includes:

1. Epidural Anaesthesia
2. Spinal Anaesthesia

3. Nerve Blocks
4. Caudal etc.

## **GENERAL ANAESTHESIA**

It involves the loss of sensation of pain with loss of consciousness.

Four major components of General Anaesthesia include:

1. Hypnosis
2. Analgesia
3. Amnesia
4. Muscle Relaxation

## **HOW THE PATIENT GET ANAESTHETIZED.....A**

### **SIMPLE OUTLINE**

On entering the blood stream the anaesthetic drug circulates to all organs of the body. The ultimate aim of the drug is to affect the Central Nervous System, which is fortunately the most richly perfused area of our body and rich in fat content so that the fat soluble anaesthetic drugs dissolve readily to produce the expected result.

In the case of inhalation anaesthetics that are absorbed to the blood stream through alveolar membrane (as long as partial pressure of anaesthetic in lung is greater than that in blood) is carried to the tissues and get absorbed and in turn remain under low tension than the blood. When administration of drug is stopped the process gets reversed. Liver is the second to absorb more quantity of drug (first being brain) and the muscles absorb only a little due to the low proportion of fat.

The gases are transported as simple solutions in blood without forming compounds with haemoglobin. The gases with relatively low solubility provide anaesthesia quickly than those with high solubility.

The highest areas are the first to lose their function, inducing unconsciousness. At this point the subconscious mind may give rise to unconscious struggling. This level of cerebral activity is next abolished leading to suppression of reflex response to stimuli. At first, coordinated reflex movements are abolished, then muscle contraction in response to, first stimulation of comparatively intensive structures and secondly stimulation of sensitive areas of the body.

### **PREPARATION OF THEATERS FOR GENERAL ANAESTHESIA**

- ☐ Check the case list so that you have a clear cut idea of time of surgery, theatre number, name of patient, age, sex, weight, diagnosis, procedure etc.
- ☐ Connect all gas lines to the wall points.
- ☐ Make electrical connection for the ventilator, monitors and other equipments.

### **PREPARATION OF AIRWAY MAINTENANCE EQUIPMENTS**

- ☞ Check for gas pressure gauges for adequate line pressures.
- ☞ Check for the backup gas cylinders and be sure that they are adequately filled.
- ☞ Check that the vaporizers are filled.
- ☞ Switch ON the anaesthesia machines.
- ☞ Check for the gas flow by rotating the knobs for each gas individually.
- ☞ Check that the save mechanism for nitrous oxide.
- ☞ Turn OFF the flows after each check.
- ☞ Connect the patient circuit (Adult or Paediatric).

- ☞ Make the ventilator setting for tidal volume, respiratory rate, I:E ratio, alarm settings etc.
- ☞ Perform leak test for the circuit.

## **PREPARATION OF INDUCTION TROLLEY**

- ☞ Check for appropriate size of oxygen mask.
- ☞ Check for all sizes of
- ☞ Anaesthesia Masks
- ☞ Airways
- ☞ Laryngoscope Blades
- ☞ Mouth Probe
- ☞ Magill's Forceps
- ☞ Check the laryngoscope is working and adequate illumination is there.

Check the appropriate size of ETT/EBT tubes, Ryles Tube are available

- ☞ Check for cuff inflation syringe, cuff pressure gauge, Magill's forceps, stylets, Bougie, Nasal Drops, Eye drops, Jelly, Spray, Betadine, Spirit, Benzoine, Cotton, Stethoscope, Gauze, Plasters for ETT Fixation, Suction catheters are available.
- ☞ Check for a working suction inlet.

## **PREPARATION OF ANAESTHESIA TROLLEY**

- ☞ Check for dressing tray, anaesthesia tray, empty tray etc.
- ☞ Open the empty tray and prepare the syringes for drugs and label them.

- ☞ Set the IV infusion (RL/ Dextrose/ Isolyte – P) with ordinary IV set/ Volume set/ Micro drip set/ Syringe infusion; attach extension and de air the line.
- ☞ Prepare flushing solution in RL with Heparin 1 unit/ml and label it.
- ☞ Prepare Transducer for CVP and arterial pressure monitor.
- ☞ Load the drugs (Induction and Maintenance) based on patients age, weight, physiological conditions and case; and note the concentration of each drug.

Check for IV cannula, Arterial cannula, Guide wire, Extensions, Three ways, CVP cannula and Catheters (Triple lumen, Double lumen, PA catheter, TD catheter, Cavafix etc.), Emergency drugs, ampoule breaking files, IV fixation plasters, blade, sutures etc.

### **PREPARATION OF MONITORS**

- Check the monitor accessories (modules, probes, transducers, NIBP cuff, PNS, electrodes).
- Attach ECG electrodes to the ECG cables.
- Attach gas monitor probe (ETCO<sub>2</sub>/ Sample lines)
- Connect the transducer and zero it.

### **MISCELLANEOUS PREPARATION**

- ☞ Check theater light and table.
- ☞ Defibrillator, ACT machine (with pre warmed cartridge), TEG, TEE, Hepcon HMS Plus Heamostasis Machine, Pulse Doppler (only for Cardiac)
- ☞ Syringe Pump, PCA Pump, Glucometer, Pressure Bag
- ☞ Bronchoscope with light source for thoracic cases.

- ☐ Fluid Warmer, Patient Warmer Sheets, arm rests, belts/straps, pillows and water bags for positioning

## SPECIAL CASES

- ☐ For prone position, keep flexometallic/ flexicare tubes.
- ☐ For thoracic cases keep Double Lumen Tubes, Bronchoscope and Epidural set.
- ☐ For awake craniotomy, sterio taxic biopsy etc., keep LMA, Succinyl Scholine.
- ☐ Sizer tube for paediatric case.
- ☐ Attracurium for patients with renal failure and Myasthenia Gravis.
- ☐ Use MRI combatible equipments for MRI cases.
- ☐ For radiological procedures be sure that emergency drugs, airway devices, including LMA, Patient circuit etc. are available.

## ASSISTING THE CASE

- ☞ Identify the patient and shift to theater.
- ☞ Make sure that antibiotics are shifted together with the patient.
- ☞ Position the patient.
- ☞ Put oxygen mask for pre oxygenation.
- ☞ Attach the monitors.
- ☞ Help for IV line, Arterial line.
- ☞ Preparation for mask ventilation.
- ☞ Assist for intubation and tube fixation.
- ☞ Turn "ON" the ventilator.

- ☞ Assist for Introducing Ryle's Tube.
- ☞ Turn "ON" the ventilator.
- ☞ Assist for Introducing Ryle's Tube.
- ☞ Help for CVP line, Positioning, Preparation.
- ☞ Connect transducer for CVP line, zero and optimize the scale.
- ☞ Help in positioning for surgery and take care of all lines, and secure the patient.
- ☞ Send ABG.

### **DURING THE SURGERY**

- ☞ Get Cardioplegia, Heparin and high volume pumps in case of cardiac surgery.
- ☞ Check that enough blood and blood samples are available.
- ☞ Once ABG result comes collect it and deliver to the anaesthetist.

Help in loading supports and in monitoring the patient in case the anaesthetist is out for some urgent calls or so.

- ☞ Fill the charge account sheet in case of Chargable items are used (Triple lumen, PA catheter, Cartridge for ACT, HMS, TEG, EBT and Epidural Set).
- ☞ Fill the Narcotic drug register and get it signed from the anaesthetist.
- ☞ Collect ICU intimation chart and hand over to ICU.
- ☞ Before shifting check all the documents are dually filled by the and all patient belongings including anaesthesia chart, charge account sheet, ABG reports, X rays, Blood and Blood products, Transfusion reaction form, antibiotics etc. are there and should be ready for shifting.

- ☞ Check that the AMBU is available for shifting. Secure all the lines and disconnect monitors once every one is ready to shift.
- ☞ Take care of the lines, Syringe pumps and other infusions and shift the power cords of the pumps, transducers etc. safe.
- ☞ While shifting to ICU assist in ventilating the patient with AMBU in case patient is not extubated.

### **THE MANIFOLD (OXYGEN & NITROUS OXIDE)**

The hospital pipeline system consists of central supplies for Oxygen, Nitrous Oxide, Air and Vacuum. Oxygen and Nitrous Oxide are under Department of Anaesthesiology, so the Anaesthesia Technicians of this institute are managing the same with helpers and they are also on 24 hours emergency call duty. This Institute has two manifolds each have a capacity of 32 oxygen cylinders in separate banks of cylinders for master and slave system (one manifold have two banks with 16 and other have 4 banks of 8 oxygen cylinders) and 10 cylinders of Nitrous oxide (only 4 nos. are using currently as per consumption). The cylinders in the manifold are type H (Oxygen 2000 Psi and Nitrous Oxide at 750 Psi Pressures). Type E and Type        cylinders are also supplied through manifold for anaesthesia machines, as reserve supply and for oxygen trolleys for wards and ICUs. The cylinders are charged at different levels to prevent simultaneous emptying of master and slave cylinders. Using a pressure regulator the cylinder pressure is reduced to 60 Psi. there are many safety systems as audio visual alarms and emergency supply facility incase of repair and maintenance. Intense care is taken to maintain a constant and sufficient supply of gases as it is life saving and life sustaining action. The records are made for daily conception, delivery and return of cylinders.

## **ROUTINE STEPS IN MAINTAINING THE MANIFOLD**

1. Check that adequate line pressure and sufficient number of reserve cylinders are there.
2. If the line pressure is inadequate maintain it as follows
  - Release the regulator on the empty side.
  - Close the valve of the cylinders on the same side
  - Disconnect the cylinders from the pipeline and keep them separately and label them as “EMPTY”
  - Attach the reserve cylinders to the pipeline and tight the nuts properly with spanners.
  - Open the cylinder close to the regulator slowly and check for leakage.
  - Open all other cylinders and ensure that no leak is there.
  - Charge the pressure regulators according to the required charging order (the bank which is charging finally will taken by the system firstly)
  - Ensure that adequate line pressure is there.
3. In emergencies the preference should have to be given for maintaining the line pressure before replacing all cylinders.
4. Make daily entry in the manifold register.

## **ADVANCED EQUIPMENTS WHICH WE ARE EXPOSED**

### **TO ;**

#### **AESTIVA MACHINE**

Aestiva is a flexible, accessible and intuitive anesthesia delivery system. It consist of micro processor controlled ventilator with internal monitors, electronic PEEP, two modes of ventilation and waveform and other parameter display, vaporizers and gas delivery system for the

conduct of anaesthesia. Thus Aestiva is two-in-one machine with anaesthesia delivery system and ventilator with display.

The two modes of ventilation are Volume controlled and Pressure controlled. It can be used for paediatrics, neonates and adult patients. The minimum and maximum values for variable parameters are

Tidal Volume – 20ml to 1500ml

Respiration Rate – 4 to 100 bpm

PEEP – 0 to 30cm H<sub>2</sub>O

I:E ratio – 1:8 to 2:1

Inspiratory Pressure – 5cm H<sub>2</sub>O to 60cm H<sub>2</sub>O

Pressure Limit – 12cm H<sub>2</sub>O to 100cm H<sub>2</sub>O

It contains built in flow transducers, pressure transducers and O<sub>2</sub> sensor (galvanic fuel cell). In addition some models allow bypass of CO<sub>2</sub> absorber also. There are audible and visual indications for alarms. Written messages are available for direction for use and in alarm conditions. Audiotorr provides a musical sound while ventilating. The machine can allow ventilation using bag.






#### FEATURES

- ☐ Pneumatic gas mixing and hypoxic guard (minimum 25% O<sub>2</sub> with any concentration of N<sub>2</sub>O)
- ☐ Minimum O<sub>2</sub> of 50ml.
- ☐ Optional dual flow meter for resolution of low gas flows (1.0 to 0.95 Ltrs and other from 1 to 15 Ltrs for O<sub>2</sub> and Air, and 1 to 10 Ltrs for N<sub>2</sub>O).
- ☐ Smooth and fast acting fresh gas control
- ☐ Pressure gauges for pipeline and cylinders
- ☐ Tool free installation and disassembling
- ☐ High levels of control and accuracy

## MRI COMPATIBLE AESTIVA MACHINE

MRI compatible AESTIVA/5 machine is boon to anaesthetist who is dealing with critically ill patients who cannot control their body movements. AESTIVA/5 MRI compatible machine is validated for use in MRI environment of 300Gauss, 1.5 T and 3T active shielded magnet. It uses same software controls as the ordinary AESTIVA/ 5 machine.

### Special features

-  Partially integrated magnetic field strength monitor.
-  Low overall height.
-  Superior ventilation with Volume control, pressure control, SIMV and electronic PEEP.
-  Tidal volume compensation.
-  Facility to use both in MRI and Operating rooms.






## DATEX OHMEDA GAS MONITOR

Modern vaporizers are capable of delivering accurate concentration of the anaesthetic agent with different flows. It is important to monitor the end- tidal concentration of that of those agents. This is of vital importance in the circle breathing system as the exhaled inhalation agents is recirculated and added to the fresh gas flow. In addition, because of lower flow, the concentration of inhalational agent the patient is receiving is different from the setting of the vaporizers. Modern analyser can measure all the agents available, halothane, enflurane, isoflurane, and desflurane on a breath-by-breath basis.

**The DATEX OHMEDA ANAESTHESIA GAS MONITOR** is a versatile equipment for the monitoring of gases during surgical

procedures. Multiparameter gas module provides a complete and integrated picture of the patient's ventilatory status

### **Features**

-  Quick access to vital information using functional keys
-  Spirometry at patient airway independent of ventilator
-  Large 12.1" LCD display with excellent visibility at distance and at different angles
-  Internal battery backup in case of power failure for transportation
-  Effortless collection of trends, waveform and alarm data

### **ENTROPY MODULE**

Entropy is related to the amount of disorder in the system (EEG). In signal analysis we can use entropy to address and describe irregularity (complexity, unpredictability) characteristic of the signal. A very irregular signal has high entropy, completely regular signal has zero entropy. It is known that EEG changes from irregular to more regular pattern when the patient loses consciousness.

M-Entropy is indicated for monitoring of the state of the central nervous system by data acquisition of EEG and frontal electromyography (FEMG) signals in the anesthesia environment.









To get entropy special sensors are there. It is easy to attach on the patient's forehead. The sensor features the familiar peel-place-press functionality and form a good contact with the skin.

Two entropy parameters are there. Fast reacting Response Entropy and more study and robust State Entropy. SE consists of the EEG signal calculate upto 32 Hz. RE includes additional high frequency upto 47 Hz.

## PHILIPS INTELLVUE PATIENT MONITOR

This is an advanced version of patient monitor from PHILIPS. It has many good features both by appearance and performance. The flat screen XGA display is notable feature. The monitor has touch screen and sped point modes for access

### Features

-  It has an 8 channel display of waveforms and has many additional numeric displays.
-  Touch screen provides quick access of information.
-  It is provide with a Multiparameter Measurement Server (MMS) including ECG, SpO<sub>2</sub>, NIBP, ETCO<sub>2</sub>, IBP or Temperature.
-  Flexible module mount with separate modules for Pressure, Temperature, ETCO<sub>2</sub>, NIBP, BIS, EEG, CCO etc.
-  Trend recording are available and the monitor has optional programs for doing various calculations including drug dose and hemodynamic calculations in addition to a separate calculator.
-  It can be used for monitoring 5 IBP modules and 4 Temperature modules simultaneously.
-  There is a very effective alarm system.
-  Moreover it can be used in the networking if required.

## BI DIRECTIONAL HAND HELD DOPPLER (BI DOP)

The dopler are designed to obtain various blood flow velocity through the ultra sound transmitted from probe to patient body and is reflected by the blood. It works on the principle of dopler shift frequency, that whenever a transmitted signal hits a moving object shifts its frequency.

### Clinical Application

- a. Detection of fetal HR by 2 MHz probe (except first trimester).

WORK BOOK 10  
b. Detection of arterial blood and venous blood flow velocity using 4, 5, 8, 10 MHz probes.

- Peak and mean velocity determination
- Peripheral vascular procedures
- Venous compression
- Flow velocity

The dopler consist of a LCD display for displaying real time wave forms, numerical data and HR. It has multi probe selection and for that it has 2, 4, 5, 8 and 10 MHz. It can store up to 30 waveforms in the data computer.

The frequency of diagnostic ultrasound is inversely proportional to depth of penetration. Five interchangeable probes are there with different frequency. 2, 4, 5, 8, 10 MHz.

2 MHz – Fetal HR and sound.

4 and 5 MHz – Deep peripheral blood velocity and flow

8 and 10 MHz – Superficial blood velocity flow

## **THROMBO ELASTO GRAPH (TEG)**

TEG is a non invasive diagnostic instrument designed to monitor and analyze the coagulation state of a blood sample in order to assist in the assessment of patient's clinical haemostatis conditions such as postoperative hemorrhage, thrombosis during cardio vascular surgery trauma etc.

The TEG analyzers approach to the monitoring of patient's haemostatis is based on these two facts

1. The end result is a single product – the clot.
2. The clots physical properties will determine whether the patient will have normal haemostatis, will haemorrhage or will develop thrombosis

## Principle

Analyser measures the clots physical property by the use of a special stationary cylindrical cuff that holds the blood and oscillator through an angle  $40^{\circ} 45'$ . A pin is suspended in the blood by a torsion wire and is monitored for motion. The torque of the rotating cup is transmitted to the immersed pin only after fibrin-platelet bonding has linked the cup and pin together. The strength of the clot affects the magnitude of the pin motion. Magnitude of output proportional to strength of clot. The rotation movement of the pin converted by mechanical electrical transducer to electrical signal and processed and monitored by a computer.

## Parameters

1. R time – R time is the period of time of latency from the time that the blood was placed in the analyser until the initial fibrin formation.
2. K – K is a measure of speed to reach a certain level of clot strength.
3.  $\alpha$  - Measures the rapidity of fibrin build up and cross linking.
4. MA – Maximum Amplitude, direct function of maximum dynamic property of fibrin and platelet bonding and it represents the ultimate strength of the fibrin clot.
5. LY 30 – LY30 measures the rate of amplitude reduction 30 minutes after MA.

## HEPCON HMS PLUS MANAGEMENT SYSTEM

HMS is a microprocessor based, multi channel clot-timing instrument with automated syringe handling for pipetting blood in to single use cartridge. It performs invitro heparin sensitivity evaluation, heparin assays, and ACT and platelet function evaluation. HMS can store and recall parameters up to five patients. The uses of this machine are

- ☞ Invitro indication of heparin response using Heparin Dose Response (HDR) cartridge.

- ☞ Simultaneous quantitative and functional evaluation of Heparin assay (HDR) and HR-ACT cartridge. Calculation of additional heparin required to maintain Protamine dose needed to reverse heparin.
- ☞ Platelet function evaluating using Hemo-STATUS platelet function cartridge.

### Use

All necessary reagents are contained within the single use test cartridge. An optical code on each cartridge instructs the system as to the type of test being performed, the parameters which need to be accounted for in calculation, and the sample volume required for the test. The operator inserts an appropriate cartridge and a sample filled syringe into the system and starts the test. HMS performs the test as instructed by the optical codes on the cartridge, test results, can be printed out automatically at the completion of the test. It provides long stage data storage.

### Principle of Operation

An integrated system consists of a component for tracking clot detection and computing results. The cartridge instructs the system, through an optical code, as to the test being performed, the calculations and format required for results, and the volume of sample needed for each channel.

The detection process uses the plunger assembly within the cartridge. The assembly is lifted and dropped through the sample/reagent mixture by a lifting mechanism in the HMS actuator. As the sample, a fibrin web forms around the daisy, located on the bottom of the plunger assembly, and impedes the rate of descent of the assembly. A photo optical system located in the actuator assembly of the instrument detects this change in fall rate. The end point of the test is the time at which clot formation is

detected, from these clotting times derived results are calculated for all tests.

### **ABOUT THE CATRIDGES**

The cartridges used are different and are colour coded . each box of colour coded cartridges comes with 3 cc syringe and blunt tip needles .

HDR and HPT cartridges are packed 9 per box HR ACT 18 per box .

HDR – BLUE (6 channel) , HR ACT (2 channel) , HEPARIN ASSAY – SILVER (4 channel) , PLATLET FUNCTION TEST , RED .

### **NUOVA BLOOD WARMER**

Based on the principle of continuous flow heating and can be used for warming all kinds of infusions/ transfusions. Aluminum heat exchanger temperature displayed by the LED. Temperature range 37-40<sup>0</sup>C. Temperature controlled by three independently running temperature sensors. Micro controller can control sensors located in such a way that total area of the heating cylinder. High temperature alarm shuts off the heater automatically and triggers a red warning light and buzzer tone.

### **Accessories**

Two separate extensions are available with warming unit and 460cm and 640cm with luer lock. They may be provide with or without bubble trap and has an injection port. Extensions are made of PVC and has an inner diameter of 3mm. Temperature insulator is provide for use incase low flow rates cooling of the fluid between the patient and the warmer and the thermometer for the calibration of temperature probe.

### **✂ MAINTENANCE**

Use only mild water for cleaning. Do not aggressive substances or scratching materials. Disinfected by alcohol based antiseptic solution

## PCA PUMP

The micro jet pump is intended for the ambulatory infusion of fluids and medications. The pump has simple controls that are easily operated by both caregivers and patients. PCA pump is intended for the IV or epidural infusion of fluids and medications used for pain management. Delivery profiles include basal rate only, basal rate with PCA bolus or PCA bolus only.

### Operation

1. Prime cassette
2. Attach cassette to pump.
3. Start infusion

### Switches

1. Pause – pause button temporarily stop infusion.
2. Resume – to resume the infusion. After pump is put in pause press this switch to resume the infusion.
3. Run/ Pause – to silence alarm.
4. Bolus – To activate bolus infusion press this button located at the back of the pump.

### Epidural analgesia administration

Limited to use with indwelling catheters specifically indicated for either short term or long-term analgesic delivery. These pump clearly differentiated either by colour coding or other means of identification. Epidural administration of drugs other than those indicated for epidural use may result in serious injury to the patient and cause patient death

## Profiles

30 pump – continuous low flow rate

200 pump – either intermittent dose with KVO rate between doses, continuous rate or KVO only.

PCA pump – intended for IV, epidural infusion of fluids and medication used for pain management.

## Delivery profile

1. Basal rate only.
2. Basal rate with PCA bolus.

PCA bolus only.

## **TRANS OESOPHAGEAL ECHO MACHINE (TEE)**

Trans oesophageal echo using M-mode was introduced in the year 1975. Modern TEE machine with multiplaner, multi frequency (3.5 to 7MHz) probes facilitates colour mapping, continuous and pulse wave cine loop displays and digital image processing providing information with better quality than TTE. Another advantage of TEE is that it provides stability of the transducer and continuous recordings that make it particularly suitable for the use in the theater. The equipment includes an echo machine and a probe. The probe contains a 5 Hz ultrasound transducer and is available for paediatric also. The probe has two main controls on the proximal end. One provides anterior and posterior movement of the tip and the other provides lateral movements.

## Standard projections

Standard projections of interest to the anaesthetist are

1. Transverse view
2. Longitudinal view
3. Mid oesophageal view

4. Trans gastric view.

### **Common clinical applications**

1. Assessment of LV function
2. Assessment of Mitral Valve and its functions
3. Detection of MI
4. Assessment of septal closures and repair of congenital heart diseases.
5. Assessment of air removal after open heart surgery.
6. Assessment of prosthetic valves
7. Detection of intracardiac masses, thrombus and vegetation
8. Evaluation of aorta for Cannulation and dissections
9. Measurement of cardiac output
10. For detection of embolism in Neuro Surgery.

### **Advantages of TEE over TTE**

1. Images with less or no sound interruptions as compared with transducer or chest wall.
2. Due to the stability of recording and availability of continuous recording its particularly useful for intra operative applications.
3. It can be used for patients with chest bandages.

### **PULMONARY FUNCTION TESTING MACHINE (PFT)**

Ventilation deals with the measurement of the body as an air pump, determining its ability to move volumes of air and speed with which it moves the air. Measurement of ventilation is performed by using a device called spirometer that measure volume displacement and the amount of gas moved in a specific time. Usually this require the patient to take a

deep breath and then exhale as rapidly and completely as possible, Forced Vital Capacity (FVC).

## **SIEMENS SERVO 900 C VENTILATOR**

It consist of 2 separate units

### **PNEUMATIC UNIT**

Comprises the gas conduction system.

Consists of two pressure transducers.

Two flow transducers, two servo valves

Transducers – Continuously delivers its actual value to the electronic units.

Servo Valves – Control of inspiratory and expiratory gas conduction

### **ELECTRONIC UNIT**

Compresses three controlling system.

Two for regulation of inspiration and one for regulation of expiration.

The three controlling systems will be in use, one at a time, depending on the timing control and selected ventilation mode.

It consists of a feedback system which interacts with both electronic and pneumatic system. It comprises proportional, integral and derivative action. It compares the actual value from the transducers and compares with the reference value. If there is any difference, adjust the piston of the valves to correct the difference.

### **TECHNICAL SPECIFICATIONS**

#### **Gas and power supply**

Electronic gas supply

Inlet pressure – 2.5 to 5 bar (250 – 500 kpa)

Other gas supply – 2.5 to 7 bar (250 – 700 kpa)

Power consumption approximately 40 W

Ventilation controls control ranges

Working pressure – up to 120 cm H<sub>2</sub>O

Modes - Volume control

- Volume control + sigh
- Pressure control
- Pressure support
- SIMV
- SIMV + Pressure support
- CPAP, MAN

Inspiratory minute volume – 0.5 to 40 l/min

Flow pattern – Constant or accelerating

Respiration rate – 5 to 20 bpm

Inspiratory time – 20 to 80 % of respiration cycle

Inspiratory pressure – 0 to 100 cm H<sub>2</sub>O

PEEP – 0 to 50 cm H<sub>2</sub>O

Upper pressure limit – 15 to 120 cm H<sub>2</sub>O

Trigger sensitivity – 20 to 0 cm H<sub>2</sub>O

SIMV – 4 to 40 or 0.4 to 4

Sigh – double tidal volume at every 100<sup>th</sup> breath

Special function

Inspiratory pause hold

Expiratory pause hold

Gas change

Monitoring

Airway pressure – 20 to 120 cm H<sub>2</sub>O

Expiratory minute volume – 0 to 40 (adults), 0 to 4 (infants)

Digital

Respiration rate – 5 to 120 bpm

Oxygen percentage – 20 to 100 %

Inspiratory tidal volume – 0 to 1999 ml

Expiratory tidal volume – 0 to 1999 ml

Expiratory minute volume – same as manual monitoring

Peak pressure – 0 to 120 cm H<sub>2</sub>O

Peak pressure – 0 to 120 cm H<sub>2</sub>O

MAWP – 0 to 120 cm H<sub>2</sub>O

### Alarm

Silence – 2 minutes

Gas supply – audiovisual (inoperative RR > 80 or inspiratory time > 20 / 25 %

Apnea – audiovisual (when interval between two breathes > 15 seconds or 4 bpm or less)

Expiratory minute volume

Oxygen percentage

Upper pressure limit

Power failure

All these have audiovisual alarms

## **SERVO 300 VENTILATOR**

Can be divided into 2 main parts:

### **1. Control Unit**

- a. Front panel section
- b. Control section

### **2. Patient Unit**

- a. Pneumatic section
- b. Power section

Both these units are connected to each other with the interconnection cable.

## **Basic Working**

The high-pressure gas is connected (i.e., air and oxygen) to two inlets. Then these gas flows are mixed and then controlled by inspiratory valve according to the panel settings. The pressure transducer. It is also coordinated with PEEP control for PEEP setting. The gas regulating section takes the feedback from inspiratory pressure transducer and oxygen analyzer and regulates them according to the values. The inspiratory system also has a safety valve to protect from high pressure more than 120 cm H<sub>2</sub>O. The oxygen cell and inspiratory pressure transducer are protected by bacteria filters.

The expiratory gas flow is measured by expiratory flow transducer and senses the flows and monitors when patient triggers. The expiratory pressure is measured by expiratory leaves from the patient system via expiratory outlet containing a non-return valve acts as a part of triggering system.

It also contains timing and control units for generating signals for all modes and setting inspiratory pause and inspiratory time etc.

## **PURITAN BENNET 7200 VENTILATOR**

Used in ICUs

Modes – CMV, SIMV, CPAP

Includes two systems – pneumatic and electrical

Pneumatic system – under control of microprocessor in the electrical system supplies air and oxygen to the patient system external to the ventilator. Air for delivery to patient and pneumatic system is supplied by external supply or optional compressor. Oxygen is provided by an external supply.






## **Working**

Air and oxygen from the valve outlet are filtered and regulated by the input system. There is a non-return valve to prevent damage to supply gas. Line pressure and flow are measured by transducer / sensors. If the air pressure decreases, compressor gives the adequate pressure. Then the gas is mixed by oxygen – air proportional solenoids (PSOL). PSOL receives preset values from front panel. Then the gas is delivered through nebulizer and filter. There is a water trap inside the exhalation port. The exhalation part consists of the PEEP circuit. There is safety valve to obtain one-way ventilation.

## **TAEMA OSIRIS PORTABLE VENTILATOR**

It is mainly a transport ventilator in case of emergency. It can also be used in ICUs and postoperative rooms in the presence of a standard monitor. It is an adjustable controlled frequency ventilator. It has the following modes of operation. It consists of knobs for adjusting tidal volume, F min, P max, I/E ratio, mode selector and PEEP knob.

### **FEATURES AND SPECIFICATIONS**

-  It can be used for controlled and assist modes of ventilation with 100% O<sub>2</sub> or in combination with air.
-  It has an effective alarm system (visual and audible) which include those for P max, Fmax, Ventilator faults etc.
-  It works with O<sub>2</sub> supply of 280Kpa to 600Kpa.
-  The tube supplied is made of silicone and is autoclavable, hence reusable.
-  There is a safety catch at 10cm H<sub>2</sub>O for PEEP adjustment.

## **Working**

The regulator regulates the oxygen from cylinder and the flow rate value adjusts the flows according to the mode selector switch and tidal volume control knob. The FIO<sub>2</sub>% is achieved by venturi system through the ambient air intake. Then the gas is supplied through a pneumatic valve operates according to the user preset values and PEEP settings. The expiratory at patient end have a non-return valve and operate according to the control through a small diameter open-ended tube. The pressure senses the system pressure. The whole system is controlled by microcontroller

## **TAEMA HORUS VENTILATOR**

Suited for ICUs for Paediatric to Adult medical care

Tidal volume – 20 to 1500ml

Respiration rate – 4 to 80bpm

Numerous ventilation modes

It is made up of two modules; a ventilator module and a monitor module.

Monitor Module – Monitoring the ventilation and managing patient alarms.

Ventilation Module – Has direct access to the set values.

As soon as the machine is started and tests are carried out continuously during use.

## **Working**

The gases from manifolds/cylinders connected to the inlet of the ventilator. It is filtered and the pressure of oxygen and air is balanced by two equalizers. If pressure of any one gas reduces,

the pressure trap is activated and both ends of equalizer are supplied by other gas. If two gases failures, the ventilator gives alarm. Then the gases are mixed in the mixer according to the preset ratio and the regulator regulates the pressure of these mixed gases. There is a reservoir to store the mixed gas to be used for compensation. There is a pressure relief and safety valve for preventing damaging to both patient and the machine. The gas then flows to patient through inspiratory valve controlled by microcontroller according to the preset values (e.g. Different modes and flows). The FIO<sub>2</sub> cell measures the oxygen percentage of the inspired gas. The inspiratory flow sensor measures the inspiratory flow. Expiratory side also contains expiratory valve and flow sensor. The expiratory valve opens and closes according to the preset cycle and PEEP value.

### **SIEMENS SERVO – I VENTILATOR**

Used for treatment and monitoring patients in range of neonate, infant and adults. It is not intended to use with anaesthetic agents. It consists of a patient unit where gases are administered and the user interface where the settings are made and ventilation is monitored. The ventilation delivers controlled or supported breaths to the patient with either constant flow or constant pressure using a set O<sub>2</sub> concentration. It can be delivered in 3 configurations.

1. Adult (10 – 250 kg)
2. Infant (0.5 – 30 kg)
3. Universal (0.5 – 250kg)

## **SITE RITE IV SCANNER**

The Site-Rite IV Ultrasound system is easy to use, light weight and portable ultrasound scanner that can be powered either by battery or by A/C power with site-rite ultrasound probes.

This system with associated probes and accessories provide ultrasound imaging of vascular structures, various organs and structures of the body.

The site rite IV probes are available in frequencies of 7.5 MHz and 9.0 MHz.

It is provided with sterile sheaths, needle guide kits which is available in 18, 20, & 21 guage and ultrasound gel.

## **SITE RITE IV SCANNER**

The scanner has a front panel consisting of :

- Power Button : Turns the scanner ON and OFF
- Depth Selection Button : Switches between different scan depth associated with the type of site rite IV probe attached to the scanner.
- Dot Marker Button : Dot markers indicate scan depth from the surface of the skin. The dots are spaced at intervals of approximately 0.5 cm.
- Image Reversed Button: Reverses the image from left to right and vice versa. Highlighted with “R” icon
- Freez Frame Button : When pressed, the image on the screen is frozen
- Gain control Button : Controls the gain or intensity of the scan image.Reduce gain by pressing on the left hand side button. Increase gain by pressing the right hand side of the button.

- Increase brightness button ; increases the brightness of the display
- Decrease brightness button ; decreases the brightness of the display

## SITE RITE IV PROBES

The standoff probe is used for superficial imaging to a depth of 4 cm. It has got a needle guide hook to which the short end of the needle guide is clipped .

For superficial imaging there are two standoff probes

. 7.5 Mhz probe , with a red cabled bend relief , optimized for imaging at depths from 1.5 cm to 4 cm below skin surface .

. 9.0 Mhz probe with a blue cabled bend relief , optimized for imaging at a depth from 0 cm to 1.5 cm below skin surface .

### **working**

At the top of each probe is a transducer probe cap , and within the cap is an oscillating transducer . A proprietary fluid surrounds the transducer and fills the cap . while the transducer oscillates an ultrasound beam is emitted that is moved back and forth , creating a wedge-shaped image . At the end of the cap is the acoustic window , through which the ultrasound beam is directed .

The distance between the transducer and the ultrasound window defines the shape of the scan plane . the transducer in the standoff probe is located farther from the acoustic window , so the image produced is a truncated sector scan , trapezoidal in shape .

Ultrasound penetrates through the fluid and soft tissue , but not through air or bone .because ultrasound cannot penetrate through air ,

there must always be a fluid medium between the probe head and the patient's skin to conduct the beam into the patient .

## **PREMEDICATION DRUGS, I.V ANAESTHESIA AGENTS AND ANALGESICS**

### **PREMEDICATION**

Reasons for administration of premedicants

To prepare the patient for anaesthesia

To decrease the dose of anesthetics

To decrease the side effects of anesthetics.

Reduction of fear and anxiety

Reduction of saliva secretion

Prevention of vagal reflexes, causes by surgical stimulation or associated with medication

To produce amnesia

### **Drugs used to Premedication**

**Atropine, Glycopyrolate:** These are useful for the reduction of secretions and maintain heart rate. These can be given intramuscularly or by intravenous. Atropine can give orally also.

**Midazolam (Hypnovel):** Dose 5-7.5 mg I.V has been used for night sedation before surgery (15 mg) or as Premedication. In very common use as a sedative during regional anaesthesia.

**Diazepam (valium diazemul, Atensive):** Dose 10-20 mg Orally or I.M Duration 4-8 hr. Combination with metoprotol greatly enhances its anxiolytic activity. **Ketamine** is using to sedate children. Morphine (dose .1-.2 mg/kg) can use for sedating the patient.

### **Drugs for induction**

Thiopentone sodium BP ; This is sodium ethyl thio barbiturate it is a yellow amorphous powder with odour resembling H<sub>2</sub>S soluble in water and alcohol and forms a 2.5 of 5% solution in distilled water of pH. 10.5 Diluted Thiopentone is not stable can left in the room temperatures. Less than 24 to 28 hours. And in fridge it is safe for 7 days. Average dose is 4-to7-mg/kg IVA solutions, which are cloudy, should be discarded.

The action is immediately (2.4 minutes to act) it should give slowly. It causes sedation, hypnosis anaesthesia and respiratory depression. Depending on the dose and rate of injection. Cerebral blood flow and CSF pressure are reduced, and intracranial pressure falls. Cerebral oxygen consumption is reduced. Blood pressure will reduce (Hypotension).

## **NARCOTIC ANALGESIC**

### **MORPHINE**

An opioid (derived from opium) Depresses, awareness, anxiety, pain, sensation and respiration stimulates vomiting center, secretion of Morphine hydrochloride is the most powerful of alkaloids and the actions of morphine and opium are similar. Morphine depresses the appreciation of pain by the brain and thus acts as a powerful analgesic. It relieves all

types of pain. If the pain is felt at all it seems to have lost its unpleasant nature.

It is a euphoric making the patient feel more cheerful. It depresses respiration. It depresses the cough center and thus damps down the cough reflex. It is a mild hypnotic and may produce drowsiness and sleep.

Morphine is also useful in treating the dyspnoea of heart failure, particularly acute failure of the left ventricle with pulmonary odema. Dose is 8 to 20 mg. Dose is 1 to 2mg per Kg bodyweight

## **PETHIDINE**

Pethidine is a synthetic substance, which is related chemically to atropine. It is less powerful than morphine, but has little effect in therapeutic doses on the cough or respiratory center. It will relax plain muscle, particularly that of the bronchial tree, but appears to cause active spasm of plain muscle of the bile ducts.

## **FENTANYL**

Fentanyl is short acting and is potent, which has made them very popular for preoperative use. They are extremely lipid soluble and rapidly enter the central nervous system thus affects seen on the system are very profound. Apart from their potent analgesic effects they cause a severe respiratory depression, hypotension, bradycardia and vomiting. However the duration of these effects is normally short like the analgesia.

## PROPOFOL

Propofol 1% is white, oil in water; isotonic emulsion for intravenous injection contains 10mg propofol in each ml. Chemical nature of propofol is 2,6-Diisopropyl phenols. It is short acting general anaesthesia agent with rapid onset action of 30-40 seconds. Recovery from anaesthesia is usually rapid. With the use of propofol 1% generally fall in the blood pressure and slight change in heart rate and are observed. However the haemodynamic parameter normally remain relatively stable.

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**LIST OF CASES ASSISTED DURING  
THE COURSE**

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SL NO	DATE	PATIENT DETAILS	DIAGNOSIS	PROCEDURE	SURGEON	ANAESTHESIA TECHNIQUE	MONITORING	ANAESTHETIST
01	01/08/05	B/O Sabini 243117 1 months M	Supracardiac TAPVC	Correction	Dr KM Dr AI	GA + CPB <b>Lines</b> 22 G Lt Hand IV 22 G Lt Femoral Artery Triple Lumen in Femoral <b>Induction</b> O <sub>2</sub> + Sevo + Fenta + Pavl <b>Intubation</b> 3.5 mm ID Portex <b>Maintenance</b> O <sub>2</sub> + N <sub>2</sub> O + Iso + Fenta + Pavl <b>CPB</b> - 133', <b>ACC</b> - 71' <b>TCA</b> - 44' <b>Supports</b> Adrenaline Isoprenaline Shifted to PSICU For Elective Ventilation	ECG, SPO <sub>2</sub> , ETCO <sub>2</sub> ABP, FIO <sub>2</sub> , Resp, AWP, CVP, Temp, Urine O/P, ACT, ABG	Dr Manikandan Dr Satyajeet
02	03/08/05	Kaliraj M 215489 9 M	VSD	VSD Closure	Prof KGS Dr RD	GA + CPB <b>Lines</b> 18 G Lt Hand IV 20 G Lt Radial Artery Triple Lumen in IJV <b>Induction</b> O <sub>2</sub> + Thio + Fenta + Pavl <b>Intubation</b> 6.5 mm ID Cuffed Portex <b>Maintenance</b> O <sub>2</sub> + N <sub>2</sub> O + Iso + Fenta + Pavl <b>CPB</b> - 72', <b>ACC</b> - 31' Shifted to PSICU For	ECG, SPO <sub>2</sub> , ETCO <sub>2</sub> ABP, FIO <sub>2</sub> , Resp, AWP, CVP, Temp, Urine O/P, ACT, ABG	Dr Manikandan Dr Satyajeet

03	04/08/05	Sreeraj V 221928 1 Month M	TGA Post BAS	Sennings	Prof KGS Dr AI	<p>Elective Ventilation</p> <p>GA + CPB</p> <p><b>Lines</b></p> <p>22 G Lt Hand IV</p> <p>22 G Lt Femoral Artery</p> <p>Triple Lumen in Femoral</p> <p><b>Induction</b></p> <p>O<sub>2</sub> + Sevo + Fenta + Pavl</p> <p><b>Intubation</b></p> <p>3.5 mm ID Portex</p> <p><b>Maintenance</b></p> <p>O<sub>2</sub> + N<sub>2</sub>O + Iso + Fenta + Pavl</p> <p><b>CPB -175', ACC - 100'</b></p> <p><b>Supports</b></p> <p>Adrenaline</p> <p>Isoprenaline</p> <p>Shifted to PSICU For Elective Ventilation</p>	ECG, SPO <sub>2</sub> , ETCO <sub>2</sub> ABP, FIO <sub>2</sub> , Resp, AWP, CVP, Temp, Urine O/P, ACT, ABG	Dr Manikandan Dr Satyajet
04	04/08/05 Emergency	B/O Hyrunisa 7 Days	TAPVC Open Sternum	Sternal Closure	Dr KM Dr RD	<p>GA</p> <p>Pt was on Ventilator From PSICU</p> <p><b>Maintenance</b></p> <p>O<sub>2</sub> + N<sub>2</sub>O + Iso + Fenta + Pavl</p> <p>Shifted to PSICU For Elective Ventilation</p>	ECG, SPO <sub>2</sub> , ETCO <sub>2</sub> ABP, FIO <sub>2</sub> , Resp, AWP, CVP, Temp, Urine O/P, ACT, ABG	Dr Neema Dr Satyajet
05	04/08/05 Emergency	B/O Sabini 243117 1 Months	TAPVC Open Sternum	Sternal Closure	Dr KM Dr AI	<p>GA</p> <p>Pt was on Ventilator From PSICU</p> <p><b>Maintenance</b></p> <p>O<sub>2</sub> + N<sub>2</sub>O + Iso + Fenta + Pavl</p> <p>Shifted to PSICU For Elective Ventilation</p>	ECG, SPO <sub>2</sub> , ETCO <sub>2</sub> ABP, FIO <sub>2</sub> , Resp, AWP, CVP, Temp, Urine O/P, ACT, ABG	Dr Neema Dr Satyajet

06	05/08/05	Alakianambi 243207 4 M	PA, PDA	BDG	Prof KGS Dr RD	GA + CPB <b>Lines</b> 20 G Lt Hand IV 22 G Lt Femoral Artery Triple Lumen in IJV <b>Induction</b> O <sub>2</sub> + Sevo + Fenta + Pavl <b>Intubation</b> 5.5 mm ID Cuffed Portex <b>Maintenance</b> O <sub>2</sub> + N <sub>2</sub> O + Iso + Fenta + Pavl <b>CPB -95'</b> , Shifted to PSICU For Elective Ventilation	ECG, SPO <sub>2</sub> , ETCO <sub>2</sub> ABP, FIO <sub>2</sub> , Resp, AWP, CVP, Temp, Urine O/P, ACT, ABG, TEE, TEG	Dr Manikandan Dr Satyajeet
07	08/08/05	AL Ameen 234372 2 M	TOF	ICR	Dr KM Dr AI	GA + CPB <b>Lines</b> 20 G Lt Hand IV 22 G Lt Femoral Artery Triple Lumen in Femoral <b>Induction</b> O <sub>2</sub> + Sevo + Fenta + Pavl <b>Intubation</b> 4 mm ID Cuffed Portex <b>Maintenance</b> O <sub>2</sub> + N <sub>2</sub> O + Iso + Fenta + Pavl <b>CPB -194', ACC - 113'</b> <b>Supports</b> Adrenaline Dobutamine Shifted to PSICU For Elective Ventilation	ECG, SPO <sub>2</sub> , ETCO <sub>2</sub> ABP, FIO <sub>2</sub> , Resp, AWP, CVP, Temp, Urine O/P, ACT, ABG, TEE	Dr Neema Dr Satyajeet
08	08/08/05	Gouri	TOF	ICR	Prof KGS	GA + CPB	ECG, SPO <sub>2</sub> ,	Dr Manikandan

		233500 2 F			Dr RD	<p><b>Lines</b> 20 G Lt Hand IV 22 G Lt Femoral Artery Triple Lumen in Femoral</p> <p><b>Induction</b> O<sub>2</sub> + Sevo + Fenta + Pavl</p> <p><b>Intubation</b> 4 mm ID Cuffed Portex</p> <p><b>Maintenance</b> O<sub>2</sub> + N<sub>2</sub>O + Iso + Fenta + Pavl</p> <p><b>CPB</b> -125', <b>ACC</b> - 59'</p> <p><b>Supports</b> Adrenaline Dobutamine Shifted to PSICU For Elective Ventilation</p>	ETCO <sub>2</sub> ABP, FIO <sub>2</sub> , Resp, AWP, CVP, Temp, Urine O/P, ACT, ABG, TEE	Dr Satyajeet
09	09/08/05	B/O Shyni 242830 21 Days F	TGA Post BAS	ASO	Dr KM Dr RD	<p>GA + CPB</p> <p><b>Lines</b> 22 G Lt Hand IV 22 G Lt Femoral Artery Triple Lumen in Femoral</p> <p><b>Induction</b> O<sub>2</sub> + Sevo + Fenta + Pavl</p> <p><b>Intubation</b> 3 mm ID Portex</p> <p><b>Maintenance</b> O<sub>2</sub> + N<sub>2</sub>O + Iso + Fenta + Pavl</p> <p><b>CPB</b> -380', <b>ACC</b> - 278'</p> <p><b>TCA</b> - 8'</p> <p><b>Supports</b> Adrenaline Isoprenaline Chest Open Shifted to</p>	ECG, SPO <sub>2</sub> , ETCO <sub>2</sub> , ABP, FIO <sub>2</sub> , Resp, AWP, CVP, Temp, Urine O/P, ACT, ABG	Dr Neema Dr Satyajeet

						PSICU For Elective Ventilation		
10	10/08/05	Jesna Biju 240687 3 F	TOF	ICR	Dr KM Dr RD	GA + CPB <b>Lines</b> 20 G Lt Hand IV 22 G Lt Radial Artery Triple Lumen in Femoral <b>Induction</b> O <sub>2</sub> + Sevo + Fenta + Pavl <b>Intubation</b> 3.5 mm ID Cuffed Portex <b>Maintenance</b> O <sub>2</sub> + N <sub>2</sub> O + Iso + Fenta + Pavl <b>CPB</b> -128°, ACC - 98° <b>Supports</b> Adrenaline Dobutamine Shifted to PSICU For Elective Ventilation	ECG, SPO <sub>2</sub> , ETCO <sub>2</sub> , ABP, FIO <sub>2</sub> , Resp, AWP, CVP, Temp, Urine O/P, ACT, ABG , TEE , TEG	Dr Neema Dr Satyajeet
11	11/08/05	Karthika 225149 2 M	ACHD , VSD , Sev PAH	VSD Closure	Dr KM Dr RD	GA + CPB <b>Lines</b> 20 G Lt Hand IV 22 G Lt Femoral Artery Triple Lumen in Femoral <b>Induction</b> O <sub>2</sub> + Sevo + Fenta + Pavl <b>Intubation</b> 3 mm ID Cuffed Portex <b>Maintenance</b> O <sub>2</sub> + N <sub>2</sub> O + Iso + Fenta + Pavl <b>CPB</b> -105°, ACC -54° <b>Supports</b> Adrenaline	ECG, SPO <sub>2</sub> , ETCO <sub>2</sub> , ABP, FIO <sub>2</sub> , Resp, AWP, CVP, Temp, Urine O/P, ACT, ABG , TEE	Dr Neema Dr Satyajeet

						Isoprenaline Shifted to PSICU For Elective Ventilation		
12	12/08/05	B/O Vanitha 243609 7 Days	TGA , PDA , ASD	ASO	Dr KM Dr AI	GA + CPB <b>Lines</b> 22 G Lt Hand IV 22 G Lt Femoral Artery Triple Lumen in Femoral <b>Induction</b> O <sub>2</sub> + Sevo + Fenta + Pavl <b>Intubation</b> 2.5 mm ID Portex <b>Maintenance</b> O <sub>2</sub> + N <sub>2</sub> O + Iso + Fenta + Pavl <b>CPB -205', ACC -113'</b> <b>TCA - 8'</b> <b>Supports</b> Adrenaline Isoprenaline Milrinone Chest Open Shifted to PSICU For Elective Ventilation	ECG, SPO <sub>2</sub> , ETCO <sub>2</sub> , ABP, FIO <sub>2</sub> , Resp, AWP, CVP, Temp, Urine O/P, ACT	Dr Neema Dr Satyajeeet
13	13/08/05 Emergency	B/O Sreeja 242473 22 Days	ASO Open Sternum	Sternal Closure	Dr KM Dr AI	GA Pt was on Ventilator From PSICU <b>Maintenance</b> O <sub>2</sub> + N <sub>2</sub> O + Iso + Fenta + Pavl Shifted to PSICU For Elective Ventilation	ECG, SPO <sub>2</sub> , ETCO <sub>2</sub> , ABP, FIO <sub>2</sub> , Resp, AWP, CVP, Temp, Urine O/P, ACT, ABG	Dr Gayathri Dr Bhupesh
14	13/08/05 Emergency	B/O Vanitha 243609 7 Days	ASO Open Sternum	Sternal Closure	Dr KM Dr AI	GA Pt was on Ventilator From PSICU	ECG, SPO <sub>2</sub> , ETCO <sub>2</sub> , ABP, FIO <sub>2</sub> , Resp,	Dr Gayathri Dr Bhupesh

						<b>Maintenance</b> O <sub>2</sub> + N <sub>2</sub> O + Iso + Fenta + Pavl Shifted to PSICU For Elective Ventilation	AWP, CVP, Temp, Urine O/P, ACT, ABG	
15	16/08/05	Sheby Philip 9301862 19 M	VSD	VSD Closure	Dr KM Dr AI	GA + CPB <b>Lines</b> 16 G Lt Hand IV 20 G Lt Radial Artery Triple Lumen in IJV <b>Induction</b> O <sub>2</sub> + Iso + Fenta + Pavl + Mida <b>Intubation</b> 8.0 mm ID Cuffed Portex <b>Maintenance</b> O <sub>2</sub> + N <sub>2</sub> O + Iso + Fenta + Pavl CPB -211', ACC -112' <b>Supports</b> Adrenaline Shifted to PSICU For Elective Ventilation	ECG, SPO <sub>2</sub> , ETCO <sub>2</sub> , ABP, FIO <sub>2</sub> , Resp, AWP, CVP, Temp, Urine O/P, ACT, ABG , TEE , TEG	Dr Neema Dr Arun
16	17/08/05	Farzeen 237839 3 M	TOF	ICR	Dr KGS Dr RD	GA + CPB <b>Lines</b> 20 G Lt Hand IV 22 G Lt Femoral Artery Triple Lumen in Femoral <b>Induction</b> O <sub>2</sub> + Sevo + Fenta + Pavl <b>Intubation</b> 3.5 mm ID Cuffed Portex <b>Maintenance</b> O <sub>2</sub> + N <sub>2</sub> O + Iso + Fenta + Pavl	ECG, SPO <sub>2</sub> , ETCO <sub>2</sub> , ABP, FIO <sub>2</sub> , Resp, AWP, CVP, Temp, Urine O/P, ACT, ABG , TEE , TEG	Dr Neema Dr Arun

						<p><b>CPB -130', ACC -58'</b>  <b>Supports</b>                  Adrenaline                  Isoprenaline                  Shifted to PSICU For                  Elective Ventilation</p>		
17	17/08/05	Saidali S 188920 5 M	TOF	ICR	Dr KM Dr AI	<p>GA + CPB  <b>Lines</b>                  20 G Lt Hand IV                  22 G Lt Femoral Artery                  Triple Lumen in IJV  <b>Induction</b>                  O<sub>2</sub> + Thio + Fenta + Pavl  <b>Intubation</b>                  5.5 mm ID Cuffed Portex  <b>Maintenance</b>                  O<sub>2</sub> + N<sub>2</sub>O + Iso + Fenta                  + Pavl  <b>CPB -150', ACC - 90'</b>                  Shifted to PSICU For                  Elective Ventilation</p>	<p>ECG, SPO<sub>2</sub>,                  ETCO<sub>2</sub> , ABP,                  FIO<sub>2</sub>, Resp,                  AWP, CVP,                  Temp, Urine                  O/P, ACT,                  ABG , TEE</p>	Dr Manikandan Dr Satyajet
18	17/08/05	Adarsh C 238173 7 M	OS ASD	ASD Closure	Dr AI Dr RD	<p>GA + CPB  <b>Lines</b>                  18 G Lt Hand IV                  20 G Lt Radial Artery                  Triple Lumen in IJV  <b>Induction</b>                  O<sub>2</sub> + Thio + Fenta + Pavl  <b>Intubation</b>                  6 mm ID Cuffed Portex  <b>Maintenance</b>                  O<sub>2</sub> + N<sub>2</sub>O + Iso + Fenta                  + Pavl  <b>CPB -150', ACC -90'</b>  <b>Supports</b></p>	<p>ECG, SPO<sub>2</sub>,                  ETCO<sub>2</sub> , ABP,                  FIO<sub>2</sub>, Resp,                  AWP, CVP,                  Temp, Urine                  O/P, ACT,                  ABG</p>	Dr Manikandan Dr Arun

						Adrenaline Dobutamine Shifted to PSICU For Elective Ventilation		
19	18/08/05	Muhsina M 243683 4 F	TOF	ICR	Dr KGS Dr AKH	GA + CPB <b>Lines</b> 20 G Lt Hand IV 22 G Rt Femoral Artery Triple Lumen in IJV <b>Induction</b> O <sub>2</sub> + Thio + Fenta + Pavl <b>Intubation</b> 5 mm ID Portex <b>Maintenance</b> O <sub>2</sub> + N <sub>2</sub> O + Iso + Fenta + Pavl <b>CPB -175°, ACC -73°</b> <b>Supports</b> Adrenaline Dobutamine Shifted to PSICU For Elective Ventilation	ECG, SPO <sub>2</sub> , ETCO <sub>2</sub> , ABP, FIO <sub>2</sub> , Resp, AWP, CVP, Temp, Urine O/P, ACT, ABG , TEG	Dr Neema Dr Satyaject
20	19/08/05	Nandhu M 225106 2 M	TOF	ICR	Dr KGS Dr VP	GA + CPB <b>Lines</b> 20 G Lt Hand IV 22 G Lt Radial Artery Triple Lumen in Femoral <b>Induction</b> O <sub>2</sub> + Sevo + Fenta + Pavl <b>Intubation</b> 4.5 mm ID Portex <b>Maintenance</b> O <sub>2</sub> + N <sub>2</sub> O + Iso + Fenta + Pavl	ECG, SPO <sub>2</sub> , ETCO <sub>2</sub> , ABP, FIO <sub>2</sub> , Resp, AWP, CVP, Temp, Urine O/P, ACT, ABG , TEE	Dr Manikandan Dr Satyaject

						<b>CPB -152', ACC -70'</b> <b>Supports</b> Adrenaline Dobutamine Shifted to PSICU For Elective Ventilation		
21	20/08/05	Anand A B 218730 8 M	SV ASD , PAPVC	ASD Closure + Rerouting PAPVC	Dr AI Dr AKH	<b>GA + CPB</b> <b>Lines</b> 18 G Lt Hand IV 22 G Lt Radial Artery Triple Lumen in IJV <b>Induction</b> O <sub>2</sub> + Thio + Fenta + Pavl <b>Intubation</b> 6.5 mm ID Cuffed Portex <b>Maintenance</b> O <sub>2</sub> + N <sub>2</sub> O + Iso + Fenta + Pavl <b>CPB -90', ACC -50'</b> Shifted to PSICU For Elective Ventilation	ECG, SPO <sub>2</sub> , ETCO <sub>2</sub> , ABP, FIO <sub>2</sub> , Resp, AWP, CVP, Temp, Urine O/P, ACT, ABG , TEE ,TEG	Dr Neema Dr Satyajeet
22	22/08/05	Castro P 206363 4 M	TOF	ICR	Dr KGS Dr AKH	<b>GA + CPB</b> <b>Lines</b> 20 G Lt Hand IV 22 G Lt Femoral Artery Triple Lumen in IJV <b>Induction</b> O <sub>2</sub> + Thio + Fenta + Pavl <b>Intubation</b> 5 mm ID Portex <b>Maintenance</b> O <sub>2</sub> + N <sub>2</sub> O + Iso + Fenta + Pavl <b>CPB -175', ACC -73'</b> <b>Supports</b>	ECG, SPO <sub>2</sub> , ETCO <sub>2</sub> , ABP, FIO <sub>2</sub> , Resp, AWP, CVP, Temp, Urine O/P, ACT, ABG	Dr Manikandan Dr Satyajeet

						Adrenaline Dobutamine Shifted to PSICU For Elective Ventilation		
23	22/08/05	B/O Suthina 243449 1 Month	TGA , VSD , ASD , PDA	ASO	Dr KM Dr AI	GA + CPB <b>Lines</b> 22 G Lt Hand IV 22 G Lt Femoral Artery Triple Lumen in Femoral <b>Induction</b> O <sub>2</sub> + Sevo + Fenta + Pavl <b>Intubation</b> 2.5 mm ID Portex <b>Maintenance</b> O <sub>2</sub> + N <sub>2</sub> O + Iso + Fenta + Pavl <b>CPB</b> -432', <b>ACC</b> -243' <b>TCA</b> - 8' <b>Supports</b> Adrenaline Isoprenaline Milrinone Chest Open Shifted to PSICU For Elective Ventilation	ECG, SPO <sub>2</sub> , ETCO <sub>2</sub> , ABP, FIO <sub>2</sub> , Resp, AWP, CVP, Temp, Urine O/P, ACT, ABG	Dr Neema Dr Arun
24	23/08/05	Renjith K R 231104 25 M	TOF	ICR	Dr KGS Dr AKH	GA + CPB <b>Lines</b> 18 G Lt Hand IV 20 G Lt Radial Artery Triple Lumen in IJV <b>Induction</b> O <sub>2</sub> + Iso + Fenta + Pavl + Mida <b>Intubation</b> 7.5 mm ID Cuffed Portex	ECG, SPO <sub>2</sub> , ETCO <sub>2</sub> , ABP, FIO <sub>2</sub> , Resp, AWP, CVP, Temp, Urine O/P, ACT, ABG , TEE ,TEG	Dr Neema Dr Arun

						<p><b>Maintenance</b> O<sub>2</sub> + N<sub>2</sub>O + Iso + Fenta + Pavl <b>CPB -167', ACC -111'</b> <b>Supports</b> Adrenaline Shifted to PSICU For Elective Ventilation</p>		
25	23/08/05	Helna 239789 2 F	TOF	ICR	Dr KM Dr AI	<p>GA + CPB <b>Lines</b> 20 G Lt Hand IV 22 G Lt Radial Artery Triple Lumen in Femoral <b>Induction</b> O<sub>2</sub> + Thio + Fenta + Mida + Pavl <b>Intubation</b> 4.5 mm ID Portex <b>Maintenance</b> O<sub>2</sub> + N<sub>2</sub>O + Iso + Fenta + Pavl <b>CPB -133', ACC -63'</b> <b>Supports</b> Adrenaline Dobutamine Shifted to PSICU For Elective Ventilation</p>	ECG, SPO <sub>2</sub> , ETCO <sub>2</sub> , ABP, FIO <sub>2</sub> , Resp, AWP, CVP, Temp, Urine O/P, ACT, ABG , TEE ,TEG	Dr Manikandan Dr Arun
26	24/08/05	Nimisha M 213684 2 F	TOF	ICR	Dr KGS Dr AI	<p>GA + CPB <b>Lines</b> 20 G Lt Hand IV 22 G Lt Femoral Artery Triple Lumen in Femoral <b>Induction</b> O<sub>2</sub> + Thio + Fenta + Mida + Pavl</p>	ECG, SPO <sub>2</sub> , ETCO <sub>2</sub> , ABP, FIO <sub>2</sub> , Resp, AWP, CVP, Temp, Urine O/P, ACT, ABG	Dr Neema Dr Satyajet

						<b>Intubation</b> 4.5 mm ID Portex <b>Maintenance</b> O <sub>2</sub> + N <sub>2</sub> O + Iso + Fenta + Pavl <b>CPB</b> -136', ACC -70' <b>Supports</b> Adrenaline Shifted to PSICU For Elective Ventilation		
27	24/08/05	B/O Sini 9700478 25 Days	TGA , ASD, PDA	ASO	Dr KM Dr RD	GA + CPB <b>Lines</b> 22 G Lt Hand IV 22 G Lt Femoral Artery Triple Lumen in Femoral <b>Induction</b> O <sub>2</sub> + Sevo + Fenta + Mida + Pavl <b>Intubation</b> 2.5 mm ID Portex <b>Maintenance</b> O <sub>2</sub> + N <sub>2</sub> O + Iso + Fenta + Pavl <b>CPB</b> -200', ACC - 110' <b>Supports</b> Adrenaline Isoprenaline Milrinone Chest Open Shifted to PSICU For Elective Ventilation	ECG, SPO <sub>2</sub> , ETCO <sub>2</sub> , ABP, FIO <sub>2</sub> , Resp, AWP, CVP, Temp, Urine O/P, ACT, ABG , TEG	Dr Neema Dr Arun
28	25/08/05	Abdul 9700478 12 M	TOF	ICR	Dr KGS Dr AKH	GA + CPB <b>Lines</b> 20 G Lt Hand IV 20 G Lt Radial Artery	ECG, SPO <sub>2</sub> , ETCO <sub>2</sub> , ABP, FIO <sub>2</sub> , Resp, AWP, CVP,	Dr Neema Dr Arun

						<p>Triple Lumen in IJV  <b>Induction</b>                      O<sub>2</sub> + Iso + Fenta + Pavl + Mida  <b>Intubation</b>                      6.5 mm ID Cuffed Portex  <b>Maintenance</b>                      O<sub>2</sub> + N<sub>2</sub>O + Iso + Fenta + Pavl                      CPB -211', ACC -112'  <b>Supports</b>                      Adrenaline                      Shifted to PSICU For Elective Ventilation</p>	<p>Temp, Urine                      O/P, ACT,                      ABG , TEE</p>	
29	25/08/05	Nivetha 5 F	OS ASD	ASD Closure	Dr KM Dr RD	<p>GA + CPB  <b>Lines</b>                      20 G Lt Hand IV                      22 G Rt Femoral Artery                      Triple Lumen in IJV  <b>Induction</b>                      O<sub>2</sub> + Thio + Fenta + Mida + Pavl  <b>Intubation</b>                      5 mm ID Portex  <b>Maintenance</b>                      O<sub>2</sub> + N<sub>2</sub>O + Iso + Fenta + Pavl                      CPB -50', ACC -16'                      Shifted to PSICU For Elective Ventilation</p>	<p>ECG, SPO<sub>2</sub>,                      ETCO<sub>2</sub> , ABP,                      FIO<sub>2</sub>, Resp,                      AWP, CVP,                      Temp, Urine                      O/P, ACT,                      ABG , TEE ,                      TEG</p>	Dr Neema Dr Arun
30	25/08/05 Emergency	B/O Sini 243864 25 Days	ASO Open Sternum	Sternal Closure	Dr KM Dr RD	<p>GA                      Pt was on Ventilator From PSICU  <b>Maintenance</b>                      O<sub>2</sub> + N<sub>2</sub>O + Iso + Fenta</p>	<p>ECG, SPO<sub>2</sub>,                      ETCO<sub>2</sub> , ABP,                      FIO<sub>2</sub>, Resp,                      AWP, CVP,                      Temp, Urine</p>	Dr Arun

						+ Pavl Shifted to PSICU For Elective Ventilation	O/P, ACT, ABG	
31	27/08/05	Shams 4 M 235803	SV ASD	ASD Closure	Dr AI Dr RD	GA + CPB <b>Lines</b> 20 G Lt Hand IV 22 G Lt Femoral Artery Triple Lumen in IJV <b>Induction</b> O <sub>2</sub> + Thio + Fenta + Pavl <b>Intubation</b> 5 mm ID Portex <b>Maintenance</b> O <sub>2</sub> + N <sub>2</sub> O + Iso + Fenta + Pavl <b>CPB -100', ACC -35'</b> Shifted to PSICU For Elective Ventilation	ECG, SPO <sub>2</sub> , ETCO <sub>2</sub> , ABP, FIO <sub>2</sub> , Resp, AWP, CVP, Temp, Urine O/P, ACT, ABG	Dr Arun Dr Satyaject
32	29/08/05	Fathima 232720 5 F	TOF	ICR	Dr KGS Dr RD	GA + CPB <b>Lines</b> 20 G Lt Hand IV 22 G Lt Radial Artery Triple Lumen in IJV <b>Induction</b> O <sub>2</sub> + Thio + Fenta + Pavl <b>Intubation</b> 5 mm ID Portex <b>Maintenance</b> O <sub>2</sub> + N <sub>2</sub> O + Iso + Fenta + Pavl <b>CPB -141', ACC -65'</b> <b>Supports</b> Adrenaline Shifted to PSICU For Elective Ventilation	ECG, SPO <sub>2</sub> , ETCO <sub>2</sub> , ABP, FIO <sub>2</sub> , Resp, AWP, CVP, Temp, Urine O/P, ACT, ABG , TEE	Dr Neema Dr Arun

33	29/08/05	Nithya 229532 2 F	DORV, VSD, LPA Origin Stenosis	BDG	Dr KM Dr AI	GA + CPB <b>Lines</b> 20 G Lt Hand IV 22 G Rt Femoral Artery Triple Lumen in Femoral <b>Induction</b> O <sub>2</sub> + Thio + Fenta + Pavl <b>Intubation</b> 4.5 mm ID Portex <b>Maintenance</b> O <sub>2</sub> + N <sub>2</sub> O + Iso + Fenta + Pavl <b>CPB -198'</b> <b>Supports</b> Adrenaline Shifted to PSICU For Elective Ventilation	ECG, SPO <sub>2</sub> , ETCO <sub>2</sub> , ABP, FIO <sub>2</sub> , Resp, AWP, CVP, Temp, Urine O/P, ACT, ABG	Dr Neema Dr Satyajee
34	30/08/05	Charu Hasini 217702 2 F	TOF	ICR	Dr KGS Dr AI	GA + CPB <b>Lines</b> 20 G Lt Hand IV 22 G Lt Radial Artery Triple Lumen in Femoral <b>Induction</b> O <sub>2</sub> + Thio + Fenta + Pavl <b>Intubation</b> 4.5 mm ID Portex <b>Maintenance</b> O <sub>2</sub> + N <sub>2</sub> O + Iso + Fenta + Pavl <b>CPB -155', ACC -50'</b> <b>Supports</b> Adrenaline Dobutamine Shifted to PSICU For Elective Ventilation	ECG, SPO <sub>2</sub> , ETCO <sub>2</sub> , ABP, FIO <sub>2</sub> , Resp, AWP, CVP, Temp, Urine O/P, ACT, ABG , TEE	Dr Neema Dr Arun

35	30/08/05	B/O Saheera 243929 20 Days	TGA, Post BAS	ASO	Dr KM Dr RD	GA + CPB <b>Lines</b> 22 G Lt Hand IV 22 G Lt Femoral Artery Triple Lumen in Femoral <b>Induction</b> O <sub>2</sub> + Sevo + Fenta + Pavl <b>Intubation</b> 2.5 mm ID Portex <b>Maintenance</b> O <sub>2</sub> + N <sub>2</sub> O + Iso + Fenta + Pavl <b>CPB -190', ACC -112'</b> <b>Supports</b> Adrenaline Isoprenaline Milrinone Noradrenaline Chest Open Shifted to PSICU For Elective Ventilation	ECG, SPO <sub>2</sub> , ETCO <sub>2</sub> , ABP, FIO <sub>2</sub> , Resp, AWP, CVP, Temp, Urine O/P, ACT, ABG	Dr Neema Dr Satyajeet
36	31/08/05	Rohini V 185094 5 F	TA, VSD, PS	BDG	Dr KM Dr AI	GA + CPB <b>Lines</b> 20 G Lt Hand IV 22 G Lt Femoral Artery Triple Lumen in IJV <b>Induction</b> O <sub>2</sub> + Thio + Fenta + Pavl <b>Intubation</b> 5 mm ID Portex <b>Maintenance</b> O <sub>2</sub> + N <sub>2</sub> O + Iso + Fenta + Pavl <b>CPB -125'</b> Shifted to PSICU For	ECG, SPO <sub>2</sub> , ETCO <sub>2</sub> , ABP, FIO <sub>2</sub> , Resp, AWP, CVP, Temp, Urine O/P, ACT, ABG	Dr Neema Dr Arun

						Elective Ventilation		
37	31/08/05	B/O Bincy 1 F	VSD, PAH	VSD Closure	Dr KGS Dr RD	GA + CPB <b>Lines</b> 22 G Lt Hand IV 22 G Rt Femoral Artery Triple Lumen in Femoral <b>Induction</b> O <sub>2</sub> + Thio + Fenta + Pavl <b>Intubation</b> 3.5 mm ID Portex <b>Maintenance</b> O <sub>2</sub> + N <sub>2</sub> O + Iso + Fenta + Pavl <b>CPB -157', ACC -47'</b> Shifted to PSICU For Elective Ventilation	ECG, SPO <sub>2</sub> , ETCO <sub>2</sub> , ABP, FIO <sub>2</sub> , Resp, AWP, CVP, Temp, Urine O/P, ACT, ABG	Dr Manikandan Dr Satyajeeet
38	31/08/05 Emergency	B/O Saheera 243929 20 Days	ASO Open Sternum	Sternal Closure	Dr KM Dr RD	GA Pt was on Ventilator From PSICU <b>Maintenance</b> O <sub>2</sub> + N <sub>2</sub> O + Iso + Fenta + Pavl Shifted to PSICU For Elective Ventilation	ECG, SPO <sub>2</sub> , ETCO <sub>2</sub> , ABP, FIO <sub>2</sub> , Resp, AWP, CVP, Temp, Urine O/P, ACT, ABG	Dr Manikandan Dr Arun
39	01/10/05	Akash 242139 6 Months	SA VSD, OS ASD, PDA	ASD, VSD Closure, PDA Ligation	Dr KGS Dr CBP	GA + CPB <b>Lines</b> 22 G Lt Hand IV 22 G Lt Femoral Artery Triple Lumen in Femoral <b>Induction</b> O <sub>2</sub> + Thio + Fenta + Pavl <b>Intubation</b> 2.5 mm ID Portex <b>Maintenance</b> O <sub>2</sub> + N <sub>2</sub> O + Iso + Fenta	ECG, SPO <sub>2</sub> , ETCO <sub>2</sub> , ABP, FIO <sub>2</sub> , Resp, AWP, CVP, Temp, Urine O/P, ACT, ABG	Dr Manikandan Dr Deepa

						+ Pavl CPB -110', ACC - 60' Shifted to PSICU For Elective Ventilation		
40	03/10/05	Sornambika 232244 5 F	OS ASD	ASD Closure	Dr KGS Dr AS	GA + CPB <b>Lines</b> 20 G Lt Hand IV 22 G Lt Radial Artery Triple Lumen in IJV <b>Induction</b> O <sub>2</sub> + Thio + Fenta + Pavl <b>Intubation</b> 5 mm ID Portex <b>Maintenance</b> O <sub>2</sub> + N <sub>2</sub> O + Iso + Fenta + Pavl CPB -73', ACC -15' Shifted to PSICU For Elective Ventilation	ECG, SPO <sub>2</sub> , ETCO <sub>2</sub> , ABP, FIO <sub>2</sub> , Resp, AWP, CVP, Temp, Urine O/P, ACT, ABG	Dr Koshy Dr Deepa
41	03/10/05	Arshad M 229393 3 F	DORV + Valve PS	BDG	Dr KM Dr CPB	GA + CPB <b>Lines</b> 22 G Lt Hand IV 22 G Lt Femoral Artery Triple Lumen in Femoral <b>Induction</b> O <sub>2</sub> + Thio + Fenta + Pavl <b>Intubation</b> 4.5 mm ID Portex <b>Maintenance</b> O <sub>2</sub> + N <sub>2</sub> O + Iso + Fenta + Pavl CPB -125' Shifted to PSICU For Elective Ventilation	ECG, SPO <sub>2</sub> , ETCO <sub>2</sub> , ABP, FIO <sub>2</sub> , Resp, AWP, CVP, Temp, Urine O/P, ACT, ABG	Dr Dash Dr Arun
42	04/10/05	Abumesar	TOF	ICR	Dr KGS	GA + CPB	ECG, SPO <sub>2</sub> ,	Dr Koshy

		233091 12 M			Dr AS	<p><b>Lines</b> 20 G Lt Hand IV 20 G Lt Radial Artery Triple Lumen in IJV</p> <p><b>Induction</b> O<sub>2</sub> + Iso + Fenta + Pavl + Mida</p> <p><b>Intubation</b> 6.5 mm ID Cuffed Portex</p> <p><b>Maintenance</b> O<sub>2</sub> + N<sub>2</sub>O + Iso + Fenta + Pavl</p> <p><b>CPB</b> -135', <b>ACC</b> -66'</p> <p><b>Supports</b> Adrenaline Shifted to PSICU For Elective Ventilation</p>	ETCO <sub>2</sub> , ABP, FIO <sub>2</sub> , Resp, AWP, CVP, Temp, Urine O/P, ACT, ABG	Dr Deepa
43	04/10/05	Ebin S 229161 10 M	OS ASD	ASD Closure	Dr AI Dr CBP	<p>GA + CPB</p> <p><b>Lines</b> 20 G Lt Hand IV 20 G Lt Radial Artery Triple Lumen in IJV</p> <p><b>Induction</b> O<sub>2</sub> + Iso + Fenta + Pavl + Mida</p> <p><b>Intubation</b> 6 mm ID Cuffed Portex</p> <p><b>Maintenance</b> O<sub>2</sub> + N<sub>2</sub>O + Iso + Fenta + Pavl</p> <p><b>CPB</b> -53', <b>ACC</b> - 18' Shifted to PSICU For Elective Ventilation</p>	ECG, SPO <sub>2</sub> , ETCO <sub>2</sub> , ABP, FIO <sub>2</sub> , Resp, AWP, CVP, Temp, Urine O/P, ACT, ABG , TEE	Dr Dash Dr Arun
44	05/10/05	Gokila 226126	OS ASD	ASD Closure	Dr AI Dr CBP	<p>GA + CPB</p> <p><b>Lines</b></p>	ECG, SPO <sub>2</sub> , ETCO <sub>2</sub> , ABP,	Dr Koshy Dr Deepa

		12 M				20 G Lt Hand IV 20 G Lt Radial Artery Triple Lumen in IJV <b>Induction</b> O <sub>2</sub> + Iso + Fenta + Pavl + Mida <b>Intubation</b> 6.5 mm ID Cuffed Portex <b>Maintenance</b> O <sub>2</sub> + N <sub>2</sub> O + Iso + Fenta + Pavl <b>CPB -58°, ACC - 22'</b> Shifted to PSICU For Elective Ventilation	FIO <sub>2</sub> , Resp, AWP, CVP, Temp, Urine O/P, ACT, ABG , TEE	
45	05/10/05	Verghese 227134 2 M	OS ASD	ASD Closure	Dr KGS Dr CBP	GA + CPB <b>Lines</b> 20 G Lt Hand IV 22 G Rt Femoral Artery Triple Lumen in Femoral <b>Induction</b> O <sub>2</sub> + Thio + Fenta + Pavl <b>Intubation</b> 5 mm ID Portex <b>Maintenance</b> O <sub>2</sub> + N <sub>2</sub> O + Iso + Fenta + Pavl <b>CPB -78°, ACC - 30'</b> Shifted to PSICU For Elective Ventilation	ECG, SPO <sub>2</sub> , ETCO <sub>2</sub> , ABP, FIO <sub>2</sub> , Resp, AWP, CVP, Temp, Urine O/P, ACT, ABG , TEE	Dr Dash Dr Arun
46	06/10/05	Immanuel 239227 2 M	SA VSD , Sev PAH	VSD Closure	Dr KGS Dr CBP	GA + CPB <b>Lines</b> 20 G Lt Hand IV 22 G Lt Radial Artery Triple Lumen in Femoral <b>Induction</b>	ECG, SPO <sub>2</sub> , ETCO <sub>2</sub> , ABP, FIO <sub>2</sub> , Resp, AWP, CVP, Temp, Urine O/P, ACT,	Dr Koshy Dr Arun

						O <sub>2</sub> + Thio + Fenta + Mida + Pavl <b>Intubation</b> 5 mm ID Portex <b>Maintenance</b> O <sub>2</sub> + N <sub>2</sub> O + Iso + Fenta + Pavl <b>CPB -78', ACC - 30'</b> <b>Supports</b> Adrenaline Shifted to PSICU For Elective Ventilation	ABG , TEE	
47	06/10/05	Fathima 9905307 6 F	DORV Pulm Atresia	B/L BDG	Dr KM Dr AI	GA + CPB <b>Lines</b> 20 G Lt Hand IV 22 G Lt Radial Artery Triple Lumen in IJV <b>Induction</b> O <sub>2</sub> + Thio + Fenta + Pavl <b>Intubation</b> 5 mm ID Portex <b>Maintenance</b> O <sub>2</sub> + N <sub>2</sub> O + Iso + Fenta + Pavl <b>CPB - 134'</b> Shifted to PSICU For Elective Ventilation	ECG, SPO <sub>2</sub> , ETCO <sub>2</sub> , ABP, FIO <sub>2</sub> , Resp, AWP, CVP, Temp, Urine O/P, ACT, ABG , TEE	Dr Dash Dr Arun
48	06/10/05 Emergency	Irfan 1 M	Post BPV Venous Catheter Stucked	Removal of Cathter	Dr KM Dr AS	Pt Already Intubated <b>Lines</b> 22 G Lt Hand IV <b>Induction</b> O <sub>2</sub> + Sevo + Fenta Shifted to PSICU For Elective Ventilation	ECG, SPO <sub>2</sub> , FIO <sub>2</sub> , Resp, Temp, Urine O/P	Dr Suneel Dr Deepa

49	07/10/05	Shamnad S 235725 1 M	Complete AV Canal Defect	ICR	Dr KGS Dr AS	GA + CPB <b>Lines</b> 22 G Lt Hand IV 22 G Rt Femoral Artery Triple Lumen in Femoral <b>Induction</b> O <sub>2</sub> + Sevo + Fenta + Pavl <b>Intubation</b> 3 mm ID Portex <b>Maintenance</b> O <sub>2</sub> + N <sub>2</sub> O + Iso + Fenta + Pavl <b>CPB – 196', ACC –128'</b> <b>Supports</b> Adrenaline Dobutamine Shifted to PSICU For Elective Ventilation	ECG, SPO <sub>2</sub> , ETCO <sub>2</sub> , ABP, FIO <sub>2</sub> , Resp, AWP, CVP, Temp, Urine O/P, ACT, ABG	Dr Dash Dr Deepa
50	07/10/05	Kiran Soman 237405 11 Months	SI , LC , CCHD, RPA Stenosis , L SVC	L BDG	Dr KM Dr CBP	GA <b>Lines</b> 22 G Lt Hand IV 22 G Lt Femoral Artery Triple Lumen in Femoral <b>Induction</b> O <sub>2</sub> + Sevo + Fenta + Pavl <b>Intubation</b> 2.5 mm ID Portex <b>Maintenance</b> O <sub>2</sub> + N <sub>2</sub> O + Iso + Fenta + Pavl <b>CPB –125'</b> Shifted to PSICU For Elective Ventilation	ECG, SPO <sub>2</sub> , ETCO <sub>2</sub> , ABP, FIO <sub>2</sub> , Resp, AWP, CVP, Temp, Urine O/P, ACT, ABG	Dr Koshy Dr Arun
51	13/10/05	Radhika D	OS ASD	ASD Closure	Dr AI	GA + CPB	ECG, SPO <sub>2</sub> ,	Dr Koshy

		241295 4 F			Dr CBP	<p><b>Lines</b> 22 G Lt Hand IV 22 G Rt Femoral Artery Triple Lumen in Femoral</p> <p><b>Induction</b> O<sub>2</sub> + Thio + Fenta + Pavl</p> <p><b>Intubation</b> 4 mm ID Portex</p> <p><b>Maintenance</b> O<sub>2</sub> + N<sub>2</sub>O + Iso + Fenta + Pavl</p> <p>CPB -104', ACC - 30'</p> <p><b>Supports</b> Adrenaline Shifted to PSICU For Elective Ventilation</p>	ETCO <sub>2</sub> , ABP, FIO <sub>2</sub> , Resp, AWP, CVP, Temp, Urine O/P, ACT, ABG	Dr Arun
52	13/10/05	Vipin T P 200645 4 M	TOF	ICR	Dr KGS Dr AS	<p>GA + CPB</p> <p><b>Lines</b> 22 G Lt Hand IV 22 G Lt Femoral Artery Triple Lumen in Femoral</p> <p><b>Induction</b> O<sub>2</sub> + Thio + Fenta + Pavl</p> <p><b>Intubation</b> 4.5mm ID Portex</p> <p><b>Maintenance</b> O<sub>2</sub> + N<sub>2</sub>O + Iso + Fenta + Pavl + Morphine</p> <p>CPB -150', ACC -90'</p> <p><b>Supports</b> Adrenaline Dobutamine Shifted to PSICU For Elective Ventilation</p>	ECG, SPO <sub>2</sub> , ETCO <sub>2</sub> , ABP, FIO <sub>2</sub> , Resp, AWP, CVP, Temp, Urine O/P, ACT, ABG	Dr Dash Dr Arun
53	14/10/05	Muneera	OS ASD , Mild	ASD Closure	Dr AI	GA + CPB	ECG, SPO <sub>2</sub> ,	Dr Koshy

		238749 5 F	PAH		Dr CBP	<p><b>Lines</b> 20 G Lt Hand IV 22 G Lt Radial Artery Triple Lumen in IJV</p> <p><b>Induction</b> O<sub>2</sub> + Sevo+ Fenta + Mida + Pavl</p> <p><b>Intubation</b> 5 mm ID Portex</p> <p><b>Maintenance</b> O<sub>2</sub> + N<sub>2</sub>O + Iso + Fenta + Pavl</p> <p><b>CPB -71', ACC -22'</b> Shifted to PSICU For Elective Ventilation</p>	ETCO <sub>2</sub> , ABP, FIO <sub>2</sub> , Resp, AWP, CVP, Temp, Urine O/P, ACT, ABG	Dr Arun
54	15/10/05	Muhseen A 238904 2 M	TOF + PDA	ICR + PDA Interuption	Dr KGS Dr CBP	<p>GA + CPB</p> <p><b>Lines</b> 20 G Lt Hand IV 22 G Rt Femoral Artery Triple Lumen in Femoral</p> <p><b>Induction</b> O<sub>2</sub> + Thio + Fenta + Mida + Pavl</p> <p><b>Intubation</b> 5 mm ID Portex</p> <p><b>Maintenance</b> O<sub>2</sub> + N<sub>2</sub>O + Iso + Fenta + Pavl</p> <p><b>CPB -153', ACC -66'</b> <b>Supports</b> Adrenaline Dobutamine Shifted to PSICU For Elective Ventilation</p>	ECG, SPO <sub>2</sub> , ETCO <sub>2</sub> , ABP, FIO <sub>2</sub> , Resp, AWP, CVP, Temp, Urine O/P, ACT, ABG	Dr Koshy Dr Arun
55	15/10/05	Sreeja	Sub Aortic VSD ,	ICR	Dr KM	GA + CPB	ECG, SPO <sub>2</sub> ,	Dr Dash

		9010282 20 F	Mild PS , Mild AR		Dr AI	<p><b>Lines</b> 18 G Lt Hand IV 20 G Lt Radial Artery Triple Lumen in IJV</p> <p><b>Induction</b> O<sub>2</sub> + Iso + Fenta + Pavl + Mida</p> <p><b>Intubation</b> 7 mm ID Cuffed Portex</p> <p><b>Maintenance</b> O<sub>2</sub> + N<sub>2</sub>O + Iso + Fenta + Pavl</p> <p><b>CPB</b> – 184', ACC –105'</p> <p><b>Supports</b> Adrenaline Dobutamine Shifted to PSICU For Elective Ventilation</p>	ETCO <sub>2</sub> , ABP, FIO <sub>2</sub> , Resp, AWP, CVP, Temp, Urine O/P, ACT, ABG , TEE , TEG	Dr Deepa
56	17/10/05	Alvin A T 245580 2 Months M	COA	Repair	Dr KM Dr AI	<p>GA + CPB</p> <p><b>Lines</b> 22 G Lt Hand IV 22 G Lt Femoral Artery Triple Lumen in Femoral</p> <p><b>Induction</b> O<sub>2</sub> + Sevo + Fenta + Mida + Pavl</p> <p><b>Intubation</b> 2.5 mm ID Portex</p> <p><b>Maintenance</b> O<sub>2</sub> + N<sub>2</sub>O + Iso + Fenta + Pavl</p> <p><b>CPB</b> –125'</p> <p><b>Supports</b> Adrenaline Chest Open Shifted to</p>	EKG, SPO <sub>2</sub> , ETCO <sub>2</sub> , ABP, FIO <sub>2</sub> , Resp, AWP, CVP, Temp, Urine O/P, ACT, ABG , TEE	Dr Dash Dr Arun

						PSICU For Elective Ventilation		
57	18/10/05	Shereena 226608 6 F	VSD , PS	ICR	Dr KGS Dr AI	GA + CPB <b>Lines</b> 20 G Lt Hand IV 22 G Lt Radial Artery Triple Lumen in IJV <b>Induction</b> O <sub>2</sub> + Sevo+ Fenta + Mida + Pavl <b>Intubation</b> 5 mm ID Portex <b>Maintenance</b> O <sub>2</sub> + N <sub>2</sub> O + Iso + Fenta + Pavl <b>CPB -118', ACC -52'</b> <b>Supports</b> Dopamine Shifted to PSICU For Elective Ventilation	ECG, SPO <sub>2</sub> , ETCO <sub>2</sub> , ABP, FIO <sub>2</sub> , Resp, AWP, CVP, Temp, Urine O/P, ACT, ABG , TEE	Dr Dash Dr Arun
58	19/10/05	Thoufeq 216684 8 M	TOF	ICR	Dr KGS Dr CBP	GA + CPB <b>Lines</b> 20 G Lt Hand IV 22 G Lt Radial Artery Triple Lumen in IJV <b>Induction</b> O <sub>2</sub> + Sevo+ Fenta + Mida + Pavl <b>Intubation</b> 6 mm ID Cuffed Portex <b>Maintenance</b> O <sub>2</sub> + N <sub>2</sub> O + Iso + Fenta + Pavl <b>CPB - 152', ACC - 77'</b> Shifted to PSICU For	ECG, SPO <sub>2</sub> , ETCO <sub>2</sub> , ABP, FIO <sub>2</sub> , Resp, AWP, CVP, Temp, Urine O/P, ACT, ABG	Dr Dash Dr Arun

59	20/10/05	Jemenamol 226314 2 F	TOF	ICR	Dr KGS Dr CBP	<p>Elective Ventilation</p> <p>GA + CPB</p> <p><b>Lines</b> 20 G Lt Hand IV 20 G Lt Femoral Artery Triple Lumen in Femoral</p> <p><b>Induction</b> O<sub>2</sub> + Thio + Fenta + Mida + Pavl</p> <p><b>Intubation</b> 5 mm ID Portex</p> <p><b>Maintenance</b> O<sub>2</sub> + N<sub>2</sub>O + Iso + Fenta + Pavl</p> <p><b>CPB</b> – 137', <b>ACC</b> – 60'</p> <p><b>Supports</b> Adrenaline NTG Shifted to PSICU For Elective Ventilation</p>	ECG, SPO <sub>2</sub> , ETCO <sub>2</sub> , ABP, FIO <sub>2</sub> , Resp, AWP, CVP, Temp, Urine O/P, ACT, ABG	Dr Koshy Dr Arun
60	21/10/05	Athul K R 238430 3 M	PA, VSD, 2MAPCA	Infudibuloplasty	Dr KM Dr AI	<p>GA + CPB</p> <p><b>Lines</b> 20 G Lt Hand IV 22 G Lt Femoral Artery Triple Lumen in Femoral</p> <p><b>Induction</b> O<sub>2</sub> + Thio + Fenta + Mida + Pavl</p> <p><b>Intubation</b> 5 mm ID Portex</p> <p><b>Maintenance</b> O<sub>2</sub> + N<sub>2</sub>O + Iso + Fenta + Pavl</p> <p><b>CPB</b> – 81', <b>ACC</b> – 40'</p> <p><b>Supports</b></p>	ECG, SPO <sub>2</sub> , ETCO <sub>2</sub> , ABP, FIO <sub>2</sub> , Resp, AWP, CVP, Temp, Urine O/P, ACT, ABG	Dr Koshy Dr Arun

						Adrenaline Shifted to PSICU For Elective Ventilation		
61	21/10/05	Asiya K R 226351 3 F	OS ASD	ASD Closure	Dr KGS Dr CBP	GA + CPB <b>Lines</b> 20 G Lt Hand IV 22 G Rt Femoral Artery Triple Lumen in Femoral <b>Induction</b> O <sub>2</sub> + Sevo + Fenta + Mida + Pavl <b>Intubation</b> 4.5 mm ID Portex <b>Maintenance</b> O <sub>2</sub> + N <sub>2</sub> O + Iso + Fenta + Pavl <b>CPB – 67', ACC – 14'</b> Shifted to PSICU For Elective Ventilation	ECG, SPO <sub>2</sub> , ETCO <sub>2</sub> , ABP, FIO <sub>2</sub> , Resp, AWP, CVP, Temp, Urine O/P, ACT, ABG	Dr Dash Dr Arun
62	22/10/05	Manu M 245497 3 M	TOF	Open Infudibuloplasty	Dr KM Dr Chandra	GA + CPB <b>Lines</b> 20 G Lt Hand IV 22 G Rt Femoral Artery Triple Lumen in Femoral <b>Induction</b> O <sub>2</sub> + Thio + Fenta + Mida + Pavl <b>Intubation</b> 5 mm ID Portex <b>Maintenance</b> O <sub>2</sub> + N <sub>2</sub> O + Iso + Fenta + Pavl <b>CPB – 141', ACC – 48'</b> <b>TCA – 22'</b> <b>Supports</b>	ECG, SPO <sub>2</sub> , ETCO <sub>2</sub> , ABP, FIO <sub>2</sub> , Resp, AWP, CVP, Temp, Urine O/P, ACT, ABG	Dr Suneel Dr Koshy

						Adrenaline Dobutamine Shifted to PSICU For Elective Ventilation		
63	22/10/05 Emergency	Shamnad 235725 1 M	Sev PAH , Sev TR /MR	MV Repair	Dr KGS Dr AI	GA + CPB <b>Lines</b> 22 G Lt Hand IV 22 G Lt Femoral Artery Triple Lumen in Femoral <b>Induction</b> O <sub>2</sub> + Sevo + Fenta + Mida + Pavl <b>Intubation</b> 4 mm ID Portex <b>Maintenance</b> O <sub>2</sub> + N <sub>2</sub> O + Iso + Fenta + Pavl <b>CPB -137', ACC -54'</b> <b>Supports</b> Adrenaline Milrinone Shifted to PSICU For Elective Ventilation	ECG, SPO <sub>2</sub> , ETCO <sub>2</sub> , ABP, FIO <sub>2</sub> , Resp, AWP, CVP, Temp, Urine O/P, ACT, ABG	Dr Koshy Dr Arun
64	22/10/05	Kavya R 241301 7 F	OS ASD	ASD Closure	Dr AI Dr RR	GA + CPB <b>Lines</b> 20 G Lt Hand IV 20 G Lt Radial Artery Triple Lumen in IJV <b>Induction</b> O <sub>2</sub> + Iso + Fenta + Pavl + Mida <b>Intubation</b> 6mm ID Cuffed Portex <b>Maintenance</b> O <sub>2</sub> + N <sub>2</sub> O + Iso + Fenta	ECG, SPO <sub>2</sub> , ETCO <sub>2</sub> , ABP, FIO <sub>2</sub> , Resp, AWP, CVP, Temp, Urine O/P, ACT, ABG	Dr Koshy Dr Arun

						+ Pavl <b>CPB – 48’, ACC – 27’</b> Shifted to PSICU For Elective Ventilation		
65	24/10/05	B/O Arul 246046 13 Days M	Post BAS , SA VSD , TGA , PDA	ASO	Dr KM Dr CBP	GA + CPB <b>Lines</b> 22 G Lt Hand IV 22 G Lt Femoral Artery Triple Lumen in Femoral <b>Induction</b> O <sub>2</sub> + Sevo + Fenta + Pavl <b>Intubation</b> 2.5 mm ID Portex <b>Maintenance</b> O <sub>2</sub> + N <sub>2</sub> O + Iso + Fenta + Pavl <b>CPB – 465’, ACC –231’</b> <b>Supports</b> Adrenaline Isoprenaline Milrinone Noradrenaline Chest Open Shifted to PSICU For Elective Ventilation	ECG, SPO <sub>2</sub> , ETCO <sub>2</sub> , ABP, FIO <sub>2</sub> , Resp, AWP, CVP, Temp, Urine O/P, ACT, ABG	Dr Subrat Dr Arun
66	25/10/05	Abhisha 239877 9 F	OS ASD	ASD Closure	Dr AI Dr CBP	GA + CPB <b>Lines</b> 20 G Lt Hand IV 20 G Lt Radial Artery Triple Lumen in IJV <b>Induction</b> O <sub>2</sub> + Iso + Fenta + Pavl + Mida <b>Intubation</b> 6.5 mm ID Cuffed Portex	ECG, SPO <sub>2</sub> , ETCO <sub>2</sub> , ABP, FIO <sub>2</sub> , Resp, AWP, CVP, Temp, Urine O/P, ACT, ABG	Dr Subrata Dr Deepa

						<b>Maintenance</b> O <sub>2</sub> + N <sub>2</sub> O + Iso + Fenta + Pavl <b>CPB – 56', ACC – 22'</b> Shifted to PSICU For Elective Ventilation		
67	25/10/05	Afrin 240291 1M	VSD , Mod PAH	VSD Closure	Dr KGS Dr AS	GA + CPB <b>Lines</b> 22 G Lt Hand IV 22 G Lt Femoral Artery Triple Lumen in Femoral <b>Induction</b> O <sub>2</sub> + Sevo + Fenta + Mida + Pavl <b>Intubation</b> 3.5 mm ID Portex <b>Maintenance</b> O <sub>2</sub> + N <sub>2</sub> O + Iso + Fenta + Pavl <b>CPB – 120', ACC – 55'</b> Shifted to PSICU For Elective Ventilation	ECG, SPO <sub>2</sub> , ETCO <sub>2</sub> , ABP, FIO <sub>2</sub> , Resp, AWP, CVP, Temp, Urine O/P, ACT, ABG	Dr Dash Dr Arun
68	26/10/05	Abina 238180 4 F	OS ASD	ASD Closure	Dr KGS Dr AS	GA + CPB <b>Lines</b> 20 G Lt Hand IV 22 G Lt Femoral Artery Triple Lumen in Femoral <b>Induction</b> O <sub>2</sub> + Thio + Fenta + Mida + Pavl <b>Intubation</b> 5 mm ID Portex <b>Maintenance</b> O <sub>2</sub> + N <sub>2</sub> O + Iso + Fenta + Pavl	ECG, SPO <sub>2</sub> , ETCO <sub>2</sub> , ABP, FIO <sub>2</sub> , Resp, AWP, CVP, Temp, Urine O/P, ACT, ABG , TEE	Dr Koshy Dr Deepa

						CPB – 70', ACC – 15' Shifted to PSICU For Elective Ventilation		
69	27/10/05	Soorya S 226704 3 M	SA VSD , Sev PAH	VSD Closure	Dr KGS Dr AS	GA + CPB <b>Lines</b> 20 G Lt Hand IV 20 G Lt Femoral Artery Triple Lumen in Femoral <b>Induction</b> O <sub>2</sub> + Thio + Fenta + Mida + Pavl <b>Intubation</b> 5 mm ID Portex <b>Maintenance</b> O <sub>2</sub> + N <sub>2</sub> O + Iso + Fenta + Pavl <b>CPB – 103', ACC – 60'</b> <b>Supports</b> Adrenaline Shifted to PSICU For Elective Ventilation	ECG, SPO <sub>2</sub> , ETCO <sub>2</sub> , ABP, FIO <sub>2</sub> , Resp, AWP, CVP, Temp, Urine O/P, ACT, ABG , TEE	Dr Dash Dr Deepa
70	27/10/05	Saranya 226630 14 F	TOF	ICR	Dr KM Dr AI	GA + CPB <b>Lines</b> 20 G Lt Hand IV 20 G Lt Radial Artery Triple Lumen in IJV <b>Induction</b> O <sub>2</sub> + Iso + Fenta + Pavl + Mida <b>Intubation</b> 7 mm ID Cuffed Portex <b>Maintenance</b> O <sub>2</sub> + N <sub>2</sub> O + Iso + Fenta + Pavl <b>CPB – 253', ACC – 125'</b>	ECG, SPO <sub>2</sub> , ETCO <sub>2</sub> , ABP, FIO <sub>2</sub> , Resp, AWP, CVP, Temp, Urine O/P, ACT, ABG , TEE	Dr Dash Dr Arun

						<b>Supports</b> Adrenaline Dobutamine Shifted to PSICU For Elective Ventilation		
71	28/10/05	Hari Prasad] 245058 5 M	Supracardiac TAPVC	Correction	Dr KGS Dr CBP	GA + CPB <b>Lines</b> 20 G Lt Hand IV 22 G Lt Radial Artery Triple Lumen in IJV <b>Induction</b> O <sub>2</sub> + Iso + Fenta + Pavl + Mida <b>Intubation</b> 6.5 mm ID Cuffed Portex <b>Maintenance</b> O <sub>2</sub> + N <sub>2</sub> O + Iso + Fenta + Pavl CPB – 146', ACC –76' <b>Supports</b> Adrenaline Dobutamine Shifted to PSICU For Elective Ventilation	ECG, SPO <sub>2</sub> , ETCO <sub>2</sub> , ABP, FIO <sub>2</sub> , Resp, AWP, CVP, Temp, Urine O/P, ACT, ABG , TEE	Dr Koshy Dr Arun
72	28/10/05	Merlin 9706371 9 M	TOF , Small PDA	ICR	Dr KM Dr AI	GA + CPB <b>Lines</b> 20 G Lt Hand IV 20 G Lt Radial Artery Triple Lumen in IJV <b>Induction</b> O <sub>2</sub> + Iso + Fenta + Pavl + Mida <b>Intubation</b> 6.5 mm ID Cuffed Portex <b>Maintenance</b>	ECG, SPO <sub>2</sub> , ETCO <sub>2</sub> , ABP, FIO <sub>2</sub> , Resp, AWP, CVP, Temp, Urine O/P, ACT, ABG , TEE	Dr Dash Dr Deepa

						O <sub>2</sub> + N <sub>2</sub> O + Iso + Fenta + Pavl CPB – 207', ACC –117' <b>Supports</b> Adrenaline Shifted to PSICU For Elective Ventilation		
73	31/10/05	Murugheswari 237437 14 F	TOF , Sev Cyanosis	ICR	Dr KM Dr CBP	GA + CPB <b>Lines</b> 20 G Lt Hand IV 20 G Lt Radial Artery Triple Lumen in IJV <b>Induction</b> O <sub>2</sub> + Iso + Fenta + Pavl + Mida <b>Intubation</b> 7 mm ID Cuffed Portex <b>Maintenance</b> O <sub>2</sub> + N <sub>2</sub> O + Iso + Fenta + Pavl CPB –162', ACC –115' <b>Supports</b> Adrenaline Dobutamine Shifted to PSICU For Elective Ventilation	ECG, SPO <sub>2</sub> , ETCO <sub>2</sub> , ABP, FIO <sub>2</sub> , Resp, AWP, CVP, Temp, Urine O/P, ACT, ABG , TEE	Dr Koshy Dr Arun
73	31/10/05	Lavanya 4 F	OS ASD	ASD Closure	Dr KGS Dr AS	GA + CPB <b>Lines</b> 20 G Lt Hand IV 20 G Lt Femoral Artery Triple Lumen in IJV <b>Induction</b> O <sub>2</sub> + Iso + Fenta + Pavl + Mida <b>Intubation</b>	ECG, SPO <sub>2</sub> , ETCO <sub>2</sub> , ABP, FIO <sub>2</sub> , Resp, AWP, CVP, Temp, Urine O/P, ACT, ABG , TEE	Dr Dash Dr Deepa

						5.5 mm ID Cuffed Portex <b>Maintenance</b> O <sub>2</sub> + N <sub>2</sub> O + Iso + Fenta + Pavl <b>CPB – 77’, ACC –20’</b> Shifted to PSICU For Elective Ventilation		
74	01/08/06	Chandu R 231039 17 M	TOF	ICR	Dr BSD Dr RR	GA + CPB <b>Lines</b> 18 G Lt Hand IV 20 G Lt Radial Artery Triple Lumen in IJV <b>Induction</b> O <sub>2</sub> + Iso + Fenta + Pavl + Mida <b>Intubation</b> 8 mm ID Cuffed Portex <b>Maintenance</b> O <sub>2</sub> + N <sub>2</sub> O + Iso + Fenta + Pavl <b>CPB – 260’, ACC – 159’</b> <b>Supports</b> Adrenaline Dobutamine Shifted to PSICU For Elective Ventilation	ECG, SPO <sub>2</sub> , ETCO <sub>2</sub> , ABP, FIO <sub>2</sub> , Resp, AWP, CVP, Temp, Urine O/P, ACT, ABG , TEE	Dr Shrinivas Dr Subru
75	01/08/06	Goutham A J 249423 4 M	OS ASD	ASD Closure	Dr KGS Dr SKP	GA + CPB <b>Lines</b> 20 G Lt Hand IV 20 G Lt Femoral Artery Triple Lumen in IJV <b>Induction</b> O <sub>2</sub> + Iso + Fenta + Pavl + Mida	ECG, SPO <sub>2</sub> , ETCO <sub>2</sub> , ABP, FIO <sub>2</sub> , Resp, AWP, CVP, Temp, Urine O/P, ACT, ABG	Dr Shrinivas Dr Subru

						<p><b>Intubation</b> 5.5 mm ID Cuffed Portex <b>Maintenance</b> O<sub>2</sub> + N<sub>2</sub>O + Iso + Fenta + Pavl <b>CPB</b> – 60', ACC – 18' <b>Supports</b> Adrenaline Dobutamine Shifted to PSICU For Elective Ventilation</p>		
76	01/08/06	Sharbina P 256208 1 F	TAPVC , VSD , PDA	Correction	Dr KM Dr NB	<p>GA + CPB <b>Lines</b> 22 G Lt Hand IV 22 G Lt Femoral Artery Triple Lumen in Femoral <b>Induction</b> O<sub>2</sub> + Sevo + Fenta + Mida + Pavl <b>Intubation</b> 3.5 mm ID Portex <b>Maintenance</b> O<sub>2</sub> + N<sub>2</sub>O + Iso + Fenta + Pavl <b>CPB</b> – 190', ACC –100' Shifted to PSICU For Elective Ventilation</p>	ECG, SPO <sub>2</sub> , ETCO <sub>2</sub> , ABP, FIO <sub>2</sub> , Resp, AWP, CVP, Temp, Urine O/P, ACT, ABG	Dr Suneel Dr Bhupesh
77	02/08/06	Ashish V G 231039 3 M	TOF	ICR	Dr KGS Dr RR	<p>GA + CPB <b>Lines</b> 20 G Lt Hand IV 20 G Lt Femoral Artery Triple Lumen in Femoral <b>Induction</b> O<sub>2</sub> + Iso + Fenta + Pavl</p>	ECG, SPO <sub>2</sub> , ETCO <sub>2</sub> , ABP, FIO <sub>2</sub> , Resp, AWP, CVP, Temp, Urine O/P, ACT, ABG	Dr Suneel Dr Bhupesh

						<p>+ Mida</p> <p><b>Intubation</b> 5mm ID Portex</p> <p><b>Maintenance</b> O<sub>2</sub> + N<sub>2</sub>O + Iso + Fenta + Pavl</p> <p><b>CPB</b> – 209’ , <b>ACC</b> – 100’</p> <p><b>Supports</b> Adrenaline Dobutamine Shifted to PSICU For Elective Ventilation</p>		
78	02/08/06	Sreevinayakan 245770 2 M	TOF	ICR	Dr KM Dr SK	<p>GA + CPB</p> <p><b>Lines</b> 20 G Lt Hand IV 20 G Lt Femoral Artery Triple Lumen in Femoral</p> <p><b>Induction</b> O<sub>2</sub> + Iso + Fenta + Pavl + Mida</p> <p><b>Intubation</b> 4 mm ID Portex</p> <p><b>Maintenance</b> O<sub>2</sub> + N<sub>2</sub>O + Iso + Fenta + Pavl</p> <p><b>CPB</b> – 110’ , <b>ACC</b> – 60’</p> <p><b>Supports</b> Adrenaline Shifted to PSICU For Elective Ventilation</p>	ECG, SPO <sub>2</sub> , ETCO <sub>2</sub> , ABP, FIO <sub>2</sub> , Resp, AWP, CVP, Temp, Urine O/P, ACT, ABG	Dr Shrinivas Dr Bhupesh
79	03/08/06	Alfiya S 213710 4 F	TOF	ICR	Dr KGS Dr SK	<p>GA + CPB</p> <p><b>Lines</b> 20 G Lt Hand IV</p>	ECG, SPO <sub>2</sub> , ETCO <sub>2</sub> , ABP, FIO <sub>2</sub> , Resp,	Dr Shrinivas Dr Subru

						20 G Lt Femoral Artery Triple Lumen in Femoral <b>Induction</b> O <sub>2</sub> + Sevo + Fenta + Pavl + Mida <b>Intubation</b> 5mm ID Portex <b>Maintenance</b> O <sub>2</sub> + N <sub>2</sub> O + Iso + Fenta + Pavl <b>CPB – 128’ , ACC – 59’</b> <b>Supports</b> Adrenaline Dobutamine Shifted to PSICU For Elective Ventilation	AWP, CVP, Temp, Urine O/P, ACT, ABG	
80	03/08/06	B/O Sheeja 255644 3 Months	TGA	Senning’s	Dr KGS Dr RR	GA + CPB <b>Lines</b> 22 G Lt Hand IV 22 G Lt Femoral Artery Triple Lumen in Femoral <b>Induction</b> O <sub>2</sub> + Sevo + Fenta + Pavl <b>Intubation</b> 2.5 mm ID Portex <b>Maintenance</b> O <sub>2</sub> + N <sub>2</sub> O + Iso + Fenta + Pavl <b>CPB – 180’ , ACC – 100’</b> <b>Supports</b> Adrenaline Isoprenaline Milrinone	ECG, SPO <sub>2</sub> , ETCO <sub>2</sub> , ABP, LAP , FIO <sub>2</sub> , Resp, AWP, CVP, Temp, Urine O/P, ACT, ABG	Dr Suneel Dr Sinha

						Noradrenaline Shifted to PSICU For Elective Ventilation		
81	04/08/06	Karishma M 197666 6 F	OS ASD , Mild PAH	ASD Closure	Dr KGS Dr RR	GA + CPB <b>Lines</b> 20 G Lt Hand IV 20 G Lt Femoral Artery Triple Lumen in IJV <b>Induction</b> O <sub>2</sub> + Iso + Fenta + Pavl + Mida <b>Intubation</b> 5.5 mm ID Cuffed Portex <b>Maintenance</b> O <sub>2</sub> + N <sub>2</sub> O + Iso + Fenta + Pavl <b>CPB – 60', ACC – 18'</b> <b>Supports</b> Adrenaline Shifted to PSICU For Elective Ventilation	ECG, SPO <sub>2</sub> , ETCO <sub>2</sub> , ABP, LAP , FIO <sub>2</sub> , Resp, AWP, CVP, Temp, Urine O/P, ACT, ABG	Dr Shrinivas Dr Bhupesh
82	05/08/06	Mary Reji 255257 6 Months	TOF	ICR	Dr KGS Dr RR	GA + CPB <b>Lines</b> 22 G Lt Hand IV 22 G Lt Femoral Artery Triple Lumen in Femoral <b>Induction</b> O <sub>2</sub> + Sevo + Fenta + Pavl + Mida <b>Intubation</b> 3.5 mm ID Portex <b>Maintenance</b> O <sub>2</sub> + N <sub>2</sub> O + Iso + Fenta + Pavl	ECG, SPO <sub>2</sub> , ETCO <sub>2</sub> , ABP, LAP , FIO <sub>2</sub> , Resp, AWP, CVP, Temp, Urine O/P, ACT, ABG	Dr Shrinivas Dr Subru

						<b>CPB – 128', ACC – 59'</b> <b>Supports</b> Adrenaline Dobutamine Shifted to PSICU For Elective Ventilation		
83	07/08/06	Kannan A 237874 2 M	VSD	VSD Closure	Prof KM Dr NB	<b>GA + CPB</b> <b>Lines</b> 22 G Lt Hand IV 20 G Lt Femoral Artery Triple Lumen in IJV <b>Induction</b> O <sub>2</sub> + Iso + Fenta + Pavl + Mida <b>Intubation</b> 4.5 mm ID Cuffed Portex <b>Maintenance</b> O <sub>2</sub> + N <sub>2</sub> O + Iso + Fenta + Pavl <b>CPB – 72', ACC – 59'</b> <b>Supports</b> Adrenaline Shifted to PSICU For Elective Ventilation	ECG, SPO <sub>2</sub> , ETCO <sub>2</sub> , ABG , FIO <sub>2</sub> , Resp, AWP, CVP, Temp, Urine O/P, ACT, ABG	Prof Rupa Dr Subru
84	08/08/06	Fousi M 231827 12 F	TOF	ICR	Prof KGS Dr RR	<b>GA + CPB</b> <b>Lines</b> 22 G Lt Hand IV 20 G Lt Radial Artery Triple Lumen in IJV <b>Induction</b> O <sub>2</sub> + Iso + Fenta + Pavl + Mida <b>Intubation</b> 6.5 mm ID Cuffed Portex <b>Maintenance</b>	ECG, SPO <sub>2</sub> , ETCO <sub>2</sub> , ABP, LAP, FIO <sub>2</sub> , Resp, AWP, CVP, Temp, Urine O/P, ACT, ABG, TEE	Prof Rupa Dr Bhupesh

						O <sub>2</sub> + N <sub>2</sub> O + Iso + Fenta + Pavl <b>CPB</b> – 162', <b>ACC</b> – 68' <b>Supports</b> Adrenaline Shifted to PSICU For Elective Ventilation		
85	09/08/06	Janofer A 245222 12 F	VSD , Sev AR	VSD Closure + AVR	Prof KM Dr RR	GA + CPB <b>Lines</b> 20 G Lt Hand IV 20 G Lt Radial Artery Triple Lumen in IJV <b>Induction</b> O <sub>2</sub> + Iso + Fenta + Pavl + Mida <b>Intubation</b> 6.5 mm ID Cuffed Portex <b>Maintenance</b> O <sub>2</sub> + N <sub>2</sub> O + Iso + Fenta + Pavl <b>CPB</b> – 273', <b>ACC</b> – 190' <b>Supports</b> Adrenaline Dobutamine Shifted to PSICU For Elective Ventilation	ECG, SPO <sub>2</sub> , ETCO <sub>2</sub> , ABP, LAP , FIO <sub>2</sub> , Resp, AWP, CVP, Temp, Urine O/P, ACT, ABG , TEE	Dr Shrinivas Dr Subru
86	09/08/06	Ramachandran 245695 42 M	TOF	ICR	Prof KM Dr SKP	GA + CPB <b>Lines</b> 16 G Lt Hand IV 20 G Lt Radial Artery Triple Lumen in IJV <b>Induction</b> O <sub>2</sub> + Iso + Fenta + Pavl + Mida	ECG, SPO <sub>2</sub> , ETCO <sub>2</sub> , ABP, LAP , FIO <sub>2</sub> , Resp, AWP, CVP, Temp, Urine O/P, ACT, ABG , TEE	Dr Shrinivas Dr Bhupesh

						<b>Intubation</b> 8.5 mm ID Cuffed Portex <b>Maintenance</b> O <sub>2</sub> + N <sub>2</sub> O + Iso + Fenta + Pavl <b>CPB – 176', ACC – 90'</b> <b>Supports</b> Adrenaline Dobutamine Nor Adrenaline Milrinone Isoprenaline Shifted to PSICU For Elective Ventilation		
87	10/08/06	Sakthi Priya C 229934 6 F	OS ASD , Mild PAH	ASD Closure	Dr BSD Dr SKP	GA + CPB <b>Lines</b> 18 G Lt Hand IV 20 G Lt Femoral Artery Triple Lumen in IJV <b>Induction</b> O <sub>2</sub> + Iso + Fenta + Pavl + Mida <b>Intubation</b> 5.5 mm ID Cuffed Portex <b>Maintenance</b> O <sub>2</sub> + N <sub>2</sub> O + Iso + Fenta + Pavl <b>CPB – 38', ACC – 16'</b> <b>Supports</b> Isoprenaline Shifted to PSICU For Elective Ventilation	ECG, SPO <sub>2</sub> , ETCO <sub>2</sub> , ABP, LAP , FIO <sub>2</sub> , Resp, AWP, CVP, Temp, Urine O/P, ACT, ABG , TEE	Prof Rupa Dr Bhupesh
88	11/08/06	Kailas Vishnu 256688 9 Days	TAPVC	PA Banding	Prof KM Dr RR	GA <b>Lines</b> 24 G Lt Hand IV	ECG, SPO <sub>2</sub> , ETCO <sub>2</sub> , ABP, LAP , FIO <sub>2</sub> ,	Dr Shrinivas Dr Subru

						22 G Lt Femoral Artery Triple Lumen in Femoral <b>Induction</b> O <sub>2</sub> + Sevo + Fenta + Pavl + Mida <b>Intubation</b> 3 mm ID Portex <b>Maintenance</b> O <sub>2</sub> + N <sub>2</sub> O + Iso + Fenta + Pavl <b>Supports</b> Adrenaline Dobutamine Shifted to PSICU For Elective Ventilation	Resp, AWP, CVP, Temp, Urine O/P, ACT, ABG	
89	14/08/06	Muhammed C 256560 4 Days	Mixed TAPVC	TAPVC Correction	Prof KM Dr SKP Dr VP	GA + CPB <b>Lines</b> 24 G Lt Hand IV 22 G Lt Femoral Artery Triple Lumen in Femoral <b>Induction</b> O <sub>2</sub> + Sevo + Fenta + Pavl + Mida <b>Intubation</b> 2.5 mm ID Portex <b>Maintenance</b> O <sub>2</sub> + N <sub>2</sub> O + Iso + Fenta + Pavl CPB – 246', ACC – 93' TCA - 30' <b>Supports</b> Adrenaline Dobutamine	ECG, SPO <sub>2</sub> , ETCO <sub>2</sub> , ABP, LAP, FIO <sub>2</sub> , Resp, AWP, CVP, Temp, Urine O/P, ACT, ABG	Prof Rupa Dr Subru

						Isoprenaline Nor Adrenaline Milrinone Shifted to PSICU For Elective Ventilation		
90	16/08/06	M Nizil 246717 10 Months M	SA VSD , Sev PAH	VSD Closure	Prof KGS Dr NB	GA + CPB <b>Lines</b> 22 G Lt Hand IV 22 G Lt Femoral Artery Triple Lumen in Femoral <b>Induction</b> O <sub>2</sub> + Sevo + Fenta + Pavl + Mida <b>Intubation</b> 3.5mm ID Portex <b>Maintenance</b> O <sub>2</sub> + N <sub>2</sub> O + Iso + Fenta + Pavl <b>CPB – 85', ACC – 40'</b> <b>Supports</b> Adrenaline Shifted to PSICU For Elective Ventilation	ECG, SPO <sub>2</sub> , ETCO <sub>2</sub> , ABP, LAP , FIO <sub>2</sub> , Resp, AWP, CVP, Temp, Urine O/P, ACT, ABG	Prof Rupa Dr Ganesh
91	18/08/06	Ashraf C M 246962 32 M	TOF	ICR	Dr BSD Dr NB	GA + CPB <b>Lines</b> 16 G Lt Hand IV 20 G Lt Radial Artery Triple Lumen in IJV <b>Induction</b> O <sub>2</sub> + Iso + Fenta + Pavl + Mida <b>Intubation</b> 8.5 mm ID Cuffed Portex <b>Maintenance</b>	ECG, SPO <sub>2</sub> , ETCO <sub>2</sub> , ABP, LAP , FIO <sub>2</sub> , Resp, AWP, CVP, Temp, Urine O/P, ACT, ABG	Dr Shrinivas Dr Subru

						O <sub>2</sub> + N <sub>2</sub> O + Iso + Fenta + Pavl CPB – 152°, ACC – 90° <b>Supports</b> Adrenaline Dobutamine Shifted to PSICU For Elective Ventilation		
92	21/08/06	Kasthuri V 243058 2 F	TOF	ICR	Prof KGS Dr RR	GA + CPB <b>Lines</b> 22 G Lt Hand IV 20 G Lt Femoral Artery Triple Lumen in Femoral <b>Induction</b> O <sub>2</sub> + Iso + Fenta + Pavl + Mida <b>Intubation</b> 3.5 mm ID Cuffed Portex <b>Maintenance</b> O <sub>2</sub> + N <sub>2</sub> O + Iso + Fenta + Pavl CPB – 108°, ACC – 50° <b>Supports</b> Adrenaline Dobutamine Shifted to PSICU For Elective Ventilation	ECG, SPO <sub>2</sub> , ETCO <sub>2</sub> , ABP, LAP , FIO <sub>2</sub> , Resp, AWP, CVP, Temp, Urine O/P, ACT, ABG , TEE , TEG	Prof Rupa Dr Ganesh
93	22/08/06	Afnan N 212836 4 M	OS ASD	ASD Closure	Dr BSD Dr NB	GA + CPB <b>Lines</b> 20 G Lt Hand IV 20 G Lt Femoral Artery Triple Lumen in IJV <b>Induction</b> O <sub>2</sub> + Iso + Fenta + Pavl	ECG, SPO <sub>2</sub> , ETCO <sub>2</sub> , ABP, LAP , FIO <sub>2</sub> , Resp, AWP, CVP, Temp, Urine O/P, ACT, ABG	Prof Rupa Dr Ganesh

						+ Mida <b>Intubation</b> 6 mm ID Cuffed Portex <b>Maintenance</b> O <sub>2</sub> + N <sub>2</sub> O + Iso + Fenta + Pavl <b>CPB – 38’, ACC – 16’</b> <b>Supports</b> Isoprenaline Shifted to PSICU For Elective Ventilation	,TEE ,TEG	
94	23/08/06	Joseph M 256967 4 Months M	SA VSD , Sev PAH	VSD Closure	Prof KM Dr RR	GA + CPB <b>Lines</b> 22 G Lt Hand IV 22 G Lt Femoral Artery Triple Lumen in Femoral <b>Induction</b> O <sub>2</sub> + Sevo + Fenta + Pavl + Mida <b>Intubation</b> 3.5mm ID Portex <b>Maintenance</b> O <sub>2</sub> + N <sub>2</sub> O + Iso + Fenta + Pavl <b>CPB – 85’, ACC – 40’</b> <b>Supports</b> Adrenaline Shifted to PSICU For Elective Ventilation	ECG, SPO <sub>2</sub> , ETCO <sub>2</sub> , ABP, LAP , FIO <sub>2</sub> , Resp, AWP, CVP, Temp, Urine O/P. ACT, ABG ,TEE ,TEG	Prof Rupa Dr Subru
95	24/08/06	B/O Sumi 257397 33 Days	CCHD , DORV , TGA , ASD , VSD , PDA	ASO	Prof KM Dr RR Dr NB	GA + CPB <b>Lines</b> 22 G Lt Hand IV 22 G Lt Femoral Artery Triple Lumen in Femoral	ECG, SPO <sub>2</sub> , ETCO <sub>2</sub> , ABP, LAP , FIO <sub>2</sub> , Resp, AWP, CVP, Temp,	Dr Shrinivas Dr Arun Dr Siva

						<p><b>Induction</b> O<sub>2</sub> + Sevo + Fenta + Pavl</p> <p><b>Intubation</b> 2.5 mm ID Portex</p> <p><b>Maintenance</b> O<sub>2</sub> + N<sub>2</sub>O + Iso + Fenta + Pavl</p> <p><b>CPB – 498’, ACC – 242’</b></p> <p><b>Supports</b> Adrenaline Isoprenaline Milrinone Noradrenaline Sternum Open Shifted to PSICU For Elective Ventilation</p>	Urine O/P, ACT, ABG, TEG	
96	25/08/06	Swaraj 246189 3 M	OS ASD	ASD Closure	Dr BSD Dr RR	<p>GA + CPB</p> <p><b>Lines</b> 20 G Lt Hand IV 20 G Lt Femoral/Artery Triple Lumen in Femoral</p> <p><b>Induction</b> O<sub>2</sub> + Iso + Fenta + Pavl + Mida</p> <p><b>Intubation</b> 4.5 mm ID Portex</p> <p><b>Maintenance</b> O<sub>2</sub> + N<sub>2</sub>O + Iso + Fenta + Pavl</p> <p><b>CPB – 38’, ACC – 16’</b></p> <p><b>Supports</b> Isoprenaline Shifted to PSICU For Elective Ventilation</p>	ECG, SPO <sub>2</sub> , ETCO <sub>2</sub> , ABP, LAP, FIO <sub>2</sub> , Resp, AWP, CVP, Temp, Urine O/P, ACT, ABG, TEE, TEG	Prof Rupa Dr Ganesh

97	29/08/06	Savad A 239522 6 M	SA VSD	VSD Closure	Prof KGS Dr RR	GA + CPB <b>Lines</b> 20 G Lt Hand IV 20 G Lt Femoral Artery Triple Lumen in Femoral <b>Induction</b> O <sub>2</sub> + Iso + Fenta + Pavl + Mida <b>Intubation</b> 6.5 mm ID Cuffed Portex <b>Maintenance</b> O <sub>2</sub> + N <sub>2</sub> O + Iso + Fenta + Pavl <b>CPB – 120', ACC – 55'</b> <b>Supports</b> Adrenaline Shifted to PSICU For Elective Ventilation	ECG, SPO <sub>2</sub> , ETCO <sub>2</sub> , ABP, LAP , FIO <sub>2</sub> , Resp, AWP, CVP, Temp, Urine O/P, ACT, ABG , TEE , TEG	Dr Shrinivas Dr Bhupesh
98	29/08/06	Vimal H 227313 4 M	TOF	ICR	Prof KM Dr SKP	GA + CPB <b>Lines</b> 20 G Lt Hand IV 20 G Lt Femoral Artery Triple Lumen in Femoral <b>Induction</b> O <sub>2</sub> + Iso + Fenta + Pavl + Mida <b>Intubation</b> 4.5 mm ID Portex <b>Maintenance</b> O <sub>2</sub> + N <sub>2</sub> O + Iso + Fenta + Pavl <b>CPB – 38', ACC – 16'</b> <b>Supports</b> Isoprenaline Shifted to PSICU For	ECG, SPO <sub>2</sub> , ETCO <sub>2</sub> , ABP, LAP , FIO <sub>2</sub> , Resp, AWP, CVP, Temp, Urine O/P, ACT, ABG , TEE , TEG	Prof Rupa Dr Ganesh

						Elective Ventilation		
99	30/08/06	Muhsin T K 251169 3 M	OS ASD	ASD Closure	Prof KGS Dr GSN	GA + CPB <b>Lines</b> 20 G Lt Hand IV 20 G Lt Femoral Artery Triple Lumen in Femoral <b>Induction</b> O <sub>2</sub> + Iso + Fenta + Pavl + Mida <b>Intubation</b> 4.5 mm ID Portex <b>Maintenance</b> O <sub>2</sub> + N <sub>2</sub> O + Iso + Fenta + Pavl <b>CPB – 38’, ACC – 16’</b> <b>Supports</b> Adrenaline Shifted to PSICU For Elective Ventilation	ECG, SPO <sub>2</sub> , ETCO <sub>2</sub> , ABP, LAP , FIO <sub>2</sub> , Resp, AWP, CVP, Temp, Urine O/P, ACT, ABG , TEE , TEG	Dr Shrinivas Dr Bhupesh
100	30/08/06	B/O Bushara 257322 6 Days	TGA , VSD , ASD	ASO	Prof km Dr RR	GA + CPB <b>Lines</b> 22 G Lt Hand IV 22 G Lt Femoral Artery Triple Lumen in Femoral <b>Induction</b> O <sub>2</sub> + Sevo + Fenta + Pavl <b>Intubation</b> 2.5 mm ID Portex <b>Maintenance</b> O <sub>2</sub> + N <sub>2</sub> O + Iso + Fenta + Pavl <b>CPB – 266’, ACC – 158’</b> <b>Supports</b> Adrenaline	ECG, SPO <sub>2</sub> , ETCO <sub>2</sub> , ABP, LAP , FIO <sub>2</sub> , Resp, AWP, CVP, Temp, Urine O/P, ACT, ABG , TEG	Prof Rupa Dr Subru

						Isoprenaline Milrinone Noradrenaline Sternum Open Shifted to PSICU For Elective Ventilation		
101	31/08/06	Ambadi A 255122 9 Months M	VSD , PDA	VSD Closure + PDA Ligation	Prof KM Dr GSN Dr SKP	GA + CPB <b>Lines</b> 22 G Lt Hand IV 22 G Lt Femoral Artery Triple Lumen in Femoral <b>Induction</b> O <sub>2</sub> + Sevo + Fenta + Pavl + Mida <b>Intubation</b> 3 mm ID Portex <b>Maintenance</b> O <sub>2</sub> + N <sub>2</sub> O + Iso + Fenta + Pavl <b>CPB – 180’, ACC – 44’</b> <b>Supports</b> Adrenaline Shifted to PSICU For Elective Ventilation	ECG, SPO <sub>2</sub> , ETCO <sub>2</sub> , ABP, LAP , FIO <sub>2</sub> , Resp, AWP, CVP, Temp, Urine O/P, ACT, ABG ,TEG	Dr Shrinivas Dr Bhupesh

SL NO	DATE	PATIENT DETAILS	DIAGNOSIS	PROCEDURE	SURGEON	ANAESTHESIA TECHNIQUE	MONITORING	ANAESTHETIST
01	01/03/05	Hamsakoya 233821 52 M	CAD, TVD	CABG	Dr JK Dr MM	<b>GA + CPB</b> <b>Lines</b> 16 G Lt Hand IV 20 G Lt Radial Artery Triple Lumen in IJV <b>Induction</b> O <sub>2</sub> + Thio + Fenta + Mida + Pavl <b>Intubation</b> 9.0 mm ID Cuffed Portex <b>Maintenance</b> O <sub>2</sub> + N <sub>2</sub> O + Iso + Fenta + Mida + Pavl <b>CPB – 89° , ACC – 67°</b> <b>Supports</b> Adrenaline Shifted to CSICU For Elective Ventilation	ECG, SPO <sub>2</sub> , ETCO <sub>2</sub> ABP, FIO <sub>2</sub> , Resp, AWP, CVP, Temp, Urine O/P, ACT, ABG	Dr Suneel Dr Arun
02	01/03/05	Veeran P 236866 50 M	Rt UL Bronchogenic Carcinoma	Rt Upper Lobectomy	Dr MUK Dr AS	<b>GA</b> <b>Lines</b> 16 G Lt Hand IV 20 G Lt Radial Artery Triple Lumen in IJV <b>Induction</b> O <sub>2</sub> + Thio + Fenta + Mida + Pavl <b>Intubation</b> 39 Fr Endobronchial Tube <b>Maintenance</b> O <sub>2</sub> + N <sub>2</sub> O + Iso + Fenta + Mida + Pavl <b>Epidural Analgesia</b> Sensorcaine + Fenta	ECG, SPO <sub>2</sub> , ETCO <sub>2</sub> ABP, FIO <sub>2</sub> , Resp, AWP, CVP, Temp, Urine O/P, ACT, ABG	Dr Neema Dr Arun

						Shifted to CSICU For Elective Ventilation		
03	01/03/05	Sandhya 140602 20 F	OS ASD	ASD Closure	Dr MM Dr PP	<b>GA + CPB</b> <b>Lines</b> 16 G Lt Hand IV 20 G Lt Radial Artery Triple Lumen in IJV <b>Induction</b> O <sub>2</sub> + Thio + Fenta + Mida + Pavl <b>Intubation</b> 7.5 mm ID Cuffed Portex <b>Maintenance</b> O <sub>2</sub> + N <sub>2</sub> O + Iso + Fenta + Mida + Pavl <b>CPB – 80’ , ACC – 18’</b> Shifted to CSICU For Elective Ventilation	ECG, SPO <sub>2</sub> , ETCO <sub>2</sub> ABP, FIO <sub>2</sub> , Resp, AWP, CVP, Temp, Urine O/P, ACT, ABG	Dr Sunil Dr Mangesh
04	01/03/05	Abdulla 236807 48 M	TAAA	Repair	Dr KSN Dr SP	<b>GA</b> <b>Lines</b> 16 G Lt Hand IV 14 G Rt Hand IV 20 G Lt Radial Artery Triple Lumen in IJV <b>Induction</b> O <sub>2</sub> + Thio + Fenta + Mida + Pavl <b>Intubation</b> 8.5 mm ID Cuffed Portex <b>Maintenance</b> O <sub>2</sub> + N <sub>2</sub> O + Iso + Fenta + Mida + Pavl Shifted to CSICU For Elective Ventilation	ECG, SPO <sub>2</sub> , ETCO <sub>2</sub> ABP, FIO <sub>2</sub> , Resp, AWP, CVP, Temp, Urine O/P, ACT, ABG	Dr Neema Dr Sunil
05	02/03/05	Sreekumar C	CAD TVD	CABG	Dr JK	<b>GA + CPB</b>	ECG, SPO <sub>2</sub> ,	Dr Hetal

	Emergency	N 9102976 59 M			Dr SP Dr CBP	<p><b>Lines</b> 16 G Lt Hand IV 20 G Lt Radial Artery Triple Lumen in IJV</p> <p><b>Induction</b> O<sub>2</sub> + Thio + Fenta + Mida + Pavl</p> <p><b>Intubation</b> 9.0 mm ID Cuffed Portex</p> <p><b>Maintenance</b> O<sub>2</sub> + N<sub>2</sub>O + Iso + Fenta + Mida + Pavl</p> <p><b>CPB</b> – 102' , ACC – 55'</p> <p><b>Supports</b> Adrenaline Dobutamine Shifted to CSICU For Elective Ventilation</p>	ETCO <sub>2</sub> ABP, FIO <sub>2</sub> , Resp, AWP, CVP, Temp, Urine O/P, ACT, ABG	Dr Arun
06	02/03/05	Joja S 234779 42 F	Sev MS	MVR	Dr KSN Dr MM	<p><b>GA + CPB</b></p> <p><b>Lines</b> 16 G Lt Hand IV 20 G Lt Radial Artery Triple Lumen in IJV</p> <p><b>Induction</b> O<sub>2</sub> + Thio + Fenta + Mida + Pavl</p> <p><b>Intubation</b> 7.5 mm ID Cuffed Portex</p> <p><b>Maintenance</b> O<sub>2</sub> + N<sub>2</sub>O + Iso + Fenta + Mida + Pavl</p> <p><b>Supports</b> Adrenaline Shifted to CSICU For Elective Ventilation</p>	ECG, SPO <sub>2</sub> , ETCO <sub>2</sub> ABP, FIO <sub>2</sub> , Resp, AWP, CVP, Temp, Urine O/P, ACT, ABG	Dr Neema Dr Subrat

07	02/03/05	Sanil Kumar 9805255 15 M	OS ASD	ASD Closure	Dr KSN Dr AKH	<p><b>GA + CPB</b>  <b>Lines</b>                      18 G Lt Hand IV                      20 G Lt Radial Artery                      Triple Lumen in IJV  <b>Induction</b>                      O<sub>2</sub> + Thio + Fenta + Mida + Pavl  <b>Intubation</b>                      8.0 mm ID Cuffed Portex  <b>Maintenance</b>                      O<sub>2</sub> + N<sub>2</sub>O + Iso + Fenta + Mida + Pavl  <b>CPB - 67', ACC - 10'</b>                      Shifted to CSICU For Elective Ventilation</p>	ECG, SPO <sub>2</sub> , ETCO <sub>2</sub> ABP, FIO <sub>2</sub> , Resp, AWP, CVP, Temp, Urine O/P, ACT, ABG	Dr Subrat Dr Mangesh
08	02/03/05	Ramachandran 188353 57 M	CAD, TVD, Sev AR	CABG + AVR	Dr JK Dr MM	<p><b>GA + CPB</b>  <b>Lines</b>                      16 G Lt Hand IV                      20 G Lt Radial Artery                      Triple Lumen in IJV  <b>Induction</b>                      O<sub>2</sub> + Thio + Fenta + Mida + Pavl  <b>Intubation</b>                      9.0 mm ID Cuffed Portex  <b>Maintenance</b>                      O<sub>2</sub> + N<sub>2</sub>O + Iso + Fenta + Mida + Pavl  <b>CPB - 102', ACC - 55'</b>  <b>Supports</b>                      Adrenaline                      Dobutamine                      Shifted to CSICU For Elective Ventilation</p>	ECG, SPO <sub>2</sub> , ETCO <sub>2</sub> ABP, FIO <sub>2</sub> , Resp, AWP, CVP, Temp, Urine O/P, ACT, ABG	Dr Sunil Dr Mangesh

09	02/03/05	Madhavan 234056 68 M	Type 1 TAAA	Repair	Dr MUK Dr SP	<b>GA</b> <b>Lines</b> 16 G Lt Hand IV 20 G Lt Radial Artery Triple Lumen in IJV <b>Induction</b> O <sub>2</sub> + Thio + Fenta + Mida + Pavl <b>Intubation</b> 9.0 mm ID Cuffed Portex <b>Maintenance</b> O <sub>2</sub> + N <sub>2</sub> O + Iso + Fenta + Mida + Pavl <b>Epidural Analgesia</b> Sensorcaine + Fenta Shifted to CSICU For Elective Ventilation	ECG, SPO <sub>2</sub> , ETCO <sub>2</sub> ABP, FIO <sub>2</sub> , Resp, AWP, CVP, Temp, Urine O/P, ACT, ABG	Dr Suneel Dr Arun
10	03/03/05	Rethinamma 237752 62 F	CAD , DVD	CABG	Dr JK Dr MM	<b>GA + CPB</b> <b>Lines</b> 16 G Lt Hand IV 20 G Lt Radial Artery Triple Lumen in IJV <b>Induction</b> O <sub>2</sub> + Thio + Fenta + Mida + Pavl <b>Intubation</b> 7.5 mm ID Cuffed Portex <b>Maintenance</b> O <sub>2</sub> + N <sub>2</sub> O + Iso + Fenta + Mida + Pavl <b>CPB - 73° , ACC - 35°</b> <b>Supports</b> Adrenaline Dobutamine Shifted to CSICU For	ECG, SPO <sub>2</sub> , ETCO <sub>2</sub> ABP, FIO <sub>2</sub> , Resp, AWP, CVP, Temp, Urine O/P, ACT, ABG	Dr Suneel Dr Arun

						Elective Ventilation		
11	03/03/05	Thampuran 237469 60 M	Rt ICA Stenosis	Carotid Artery Endarterectomy	Dr MUK Dr SP	<b>GA</b> <b>Lines</b> 16 G Lt Hand IV 20 G Lt Radial Artery Triple Lumen in IJV <b>Induction</b> O <sub>2</sub> + Thio + Fenta + Mida + Pavl <b>Intubation</b> 9.0 mm ID Cuffed Portex <b>Maintenance</b> O <sub>2</sub> + N <sub>2</sub> O + Iso + Fenta + Mida + Pavl Shifted to CSICU For Elective Ventilation	ECG, SPO <sub>2</sub> , ETCO <sub>2</sub> ABP, FIO <sub>2</sub> , Resp, AWP, CVP, Temp, Urine O/P, ACT, ABG	Dr Sunil Dr Mangesh
12	03/03/05	Sulochana 237322 42 F	OS ASD	ASD Closure	Dr KSN Dr CBP	<b>GA + CPB</b> <b>Lines</b> 16 G Lt Hand IV 20 G Lt Radial Artery Triple Lumen in IJV <b>Induction</b> O <sub>2</sub> + Thio + Fenta + Mida + Pavl <b>Intubation</b> 7.5 mm ID Cuffed Portex <b>Maintenance</b> O <sub>2</sub> + N <sub>2</sub> O + Iso + Fenta + Mida + Pavl <b>CPB – 80', ACC – 18'</b> Shifted to CSICU For Elective Ventilation	ECG, SPO <sub>2</sub> , ETCO <sub>2</sub> ABP, FIO <sub>2</sub> , Resp, AWP, CVP, Temp, Urine O/P, ACT, ABG	Dr Suneel Dr Subrat
13	04/03/05	Vamanan N 233328 61 M	CAD , TVD	CABG	Dr JK Dr MM	<b>GA + CPB</b> <b>Lines</b> 16 G Lt Hand IV	ECG, SPO <sub>2</sub> , ETCO <sub>2</sub> ABP, FIO <sub>2</sub> , Resp,	Dr Sunil Dr Mangesh

						20 G Lt Radial Artery Triple Lumen in IJV <b>Induction</b> O <sub>2</sub> + Thio + Fenta + Mida + Pavl <b>Intubation</b> 9.0 mm ID Cuffed Portex <b>Maintenance</b> O <sub>2</sub> + N <sub>2</sub> O + Iso + Fenta + Mida + Pavl <b>CPB – 100’ , ACC – 60’</b> <b>Supports</b> Adrenaline Shifted to CSICU For Elective Ventilation	AWP, CVP, Temp, Urine O/P, ACT, ABG	
14	04/03/05	Savitriamma 237210 61 F	Rt Lower Lobe Bronchogenic Carcinoma	Lobectomy	Dr MUK Dr CBP	<b>GA</b> <b>Lines</b> 16 G Lt Hand IV 20 G Lt Radial Artery Triple Lumen in IJV <b>Induction</b> O <sub>2</sub> + Thio + Fenta + Mida + Pavl <b>Intubation</b> 35 Fr Lt Endobronchial Tube <b>Fibre Optic Bronchoscopy Done.</b> <b>Maintenance</b> O <sub>2</sub> + N <sub>2</sub> O + Iso + Fenta + Mida + Pavl <b>Epidural Analgesia</b> Sensorcaine + Fenta Shifted to CSICU For Elective Ventilation	ECG, SPO <sub>2</sub> , ETCO <sub>2</sub> , ABP, FIO <sub>2</sub> , Resp, AWP, CVP, Temp, Urine O/P, ACT, ABG	Dr Neema Dr Subrat
15	04/03/05	Hussain	CAD , DVD	CABG	Dr JK	<b>GA + CPB</b>	ECG, SPO <sub>2</sub> ,	Dr Suncel

		230376 43 M			Dr MM	<p><b>Lines</b> 16 G Lt Hand IV 20 G Lt Radial Artery Triple Lumen in IJV</p> <p><b>Induction</b> O<sub>2</sub> + Thio + Fenta + Mida + Pavl</p> <p><b>Intubation</b> 9.0 mm ID Cuffed Portex</p> <p><b>Maintenance</b> O<sub>2</sub> + N<sub>2</sub>O + Iso + Fenta + Mida + Pavl</p> <p><b>CPB</b> – 120', <b>ACC</b> – 70'</p> <p><b>Supports</b> Adrenaline Shifted to CSICU For Elective Ventilation</p>	ETCO <sub>2</sub> , ABP, FIO <sub>2</sub> , Resp, AWP, CVP, Temp, Urine O/P, ACT, ABG	Dr Arun
16	04/03/05	Rajamma P C 7252 48 M	RHD , Sev MS , Mod AS , Mod MR , Mod AR , Mod PAH	DVR	Dr KSN Dr SP	<p><b>GA + CPB</b></p> <p><b>Lines</b> 16 G Lt Hand IV 20 G Lt Radial Artery Triple Lumen in IJV</p> <p><b>Induction</b> O<sub>2</sub> + Thio + Fenta + Mida + Pavl</p> <p><b>Intubation</b> 9.0 mm ID Cuffed Portex</p> <p><b>Maintenance</b> O<sub>2</sub> + N<sub>2</sub>O + Iso + Fenta + Mida + Pavl</p> <p><b>CPB</b> – 110', <b>ACC</b> – 60'</p> <p><b>Supports</b> Adrenaline Shifted to CSICU For Elective Ventilation</p>	ECG, SPO <sub>2</sub> , ETCO <sub>2</sub> , ABP, FIO <sub>2</sub> , Resp, AWP, CVP, Temp, Urine O/P, ACT, ABG	Dr Suneel Dr Arun

17	05/03/05	Reetha 9700779 46 M	CAD , SVD	CABG	Dr JK Dr MM	<b>GA + CPB</b> <b>Lines</b> 16 G Lt Hand IV 20 G Lt Radial Artery Triple Lumen in IJV <b>Induction</b> O <sub>2</sub> + Thio + Fenta + Mida + Pavl <b>Intubation</b> 9.0 mm ID Cuffed Portex <b>Maintenance</b> O <sub>2</sub> + N <sub>2</sub> O + Iso + Fenta + Mida + Pavl <b>CPB – 59’ , ACC – 20’</b> <b>Supports</b> Adrenaline Dobutamine Shifted to CSICU For Elective Ventilation	ECG, SPO <sub>2</sub> , ETCO <sub>2</sub> , ABP, FIO <sub>2</sub> , Resp, AWP, CVP, Temp, Urine O/P, ACT, ABG	Dr Subrat Dr Mangesh
18	05/03/05	Ampili Kumar 233387 46 M	Sev MR , Mod AR , Mod MS	DVR	Prof KSN Dr MM	<b>GA + CPB</b> <b>Lines</b> 16 G Lt Hand IV 20 G Lt Radial Artery Triple Lumen in IJV <b>Induction</b> O <sub>2</sub> + Thio + Fenta + Mida + Pavl <b>Intubation</b> 9.0 mm ID Cuffed Portex <b>Maintenance</b> O <sub>2</sub> + N <sub>2</sub> O + Iso + Fenta + Mida + Pavl <b>CPB – 117’ , ACC – 87’</b> Shifted to CSICU For Elective Ventilation	ECG, SPO <sub>2</sub> , ETCO <sub>2</sub> , ABP, FIO <sub>2</sub> , Resp, AWP, CVP, Temp, Urine O/P, ACT, ABG	Dr Suneel Dr Arun

19	07/03/05	Manjula A 9005038 23 F	ACHD , OS ASD Mild PAH	ASD Closure	Prof KSN Dr SP	<b>GA + CPB</b> <b>Lines</b> 16 G Lt Hand IV 20 G Lt Radial Artery 18 G Secalon in IJV <b>Induction</b> O <sub>2</sub> + Thio + Fenta + Mida + Pavl <b>Intubation</b> 7.5 mm ID Cuffed Portex <b>Maintenance</b> O <sub>2</sub> + N <sub>2</sub> O + Iso + Fenta + Mida + Pavl <b>CPB – 51’ , ACC – 24’</b> Shifted to CSICU For Elective Ventilation	ECG, SPO <sub>2</sub> , ETCO <sub>2</sub> , ABP, FIO <sub>2</sub> , Resp, AWP, CVP, Temp, Urine O/P, ACT, ABG	Dr Hetal Dr Mangesh
20	07/03/05	Omana 233519 65 F	CAD , DVD	CABG	Dr JK Dr MM	<b>GA + CPB</b> <b>Lines</b> 16 G Lt Hand IV 20 G Lt Radial Artery Triple Lumen in IJV <b>Induction</b> O <sub>2</sub> + Thio + Fenta + Mida + Pavl <b>Intubation</b> 7.5 mm ID Cuffed Portex <b>Maintenance</b> O <sub>2</sub> + N <sub>2</sub> O + Iso + Fenta + Mida + Pavl <b>CPB – 69’ , ACC – 39’</b> <b>Supports</b> Adrenaline Shifted to CSICU For Elective Ventilation	ECG, SPO <sub>2</sub> , ETCO <sub>2</sub> , ABP, FIO <sub>2</sub> , Resp, AWP, CVP, Temp, Urine O/P, ACT, ABG	Dr Subrat Dr Mangesh
21	07/03/05	Thampi A P	Bilateral Aortoiliac	AF Graft	Dr MUK	<b>GA</b>	ECG, SPO <sub>2</sub> ,	Dr Neema

		236745 67 M	Block		Dr RD	<b>Lines</b> 16 G Lt Hand IV 20 G Lt Radial Artery Triple Lumen in IJV <b>Induction</b> O <sub>2</sub> + Thio + Fenta + Mida + Pavl <b>Intubation</b> 9.0 mm ID Cuffed Portex <b>Maintenance</b> O <sub>2</sub> + N <sub>2</sub> O + Iso + Fenta + Mida + Pavl <b>Epidural Analgesia</b> Sensorcaine + Fenta Shifted to CSICU For Elective Ventilation	ETCO <sub>2</sub> , ABP, FIO <sub>2</sub> , Resp, AWP, CVP, Temp, Urine O/P, ACT, ABG	Dr Arun
22	07/03/05	Bappu V 232821 52 M	CAD , DVD	CABG	Dr JK Dr MM	<b>GA + CPB</b> <b>Lines</b> 16 G Lt Hand IV 20 G Lt Radial Artery Triple Lumen in IJV <b>Induction</b> O <sub>2</sub> + Thio + Fenta + Mida + Pavl <b>Intubation</b> 9.0 mm ID Cuffed Portex <b>Maintenance</b> O <sub>2</sub> + N <sub>2</sub> O + Iso + Fenta + Mida + Pavl <b>CPB – 58' , ACC – 32'</b> <b>Supports</b> Adrenaline Shifted to CSICU For Elective Ventilation	ECG, SPO <sub>2</sub> , ETCO <sub>2</sub> , ABP, FIO <sub>2</sub> , Resp, AWP, CVP, Temp, Urine O/P, ACT, ABG	Dr Suneel Dr Subrat

23	09/03/05	Ranjani S B 8708499 42 F	Sev MS , Mod PAH , Mod TR	MVR	Prof KSN Dr AKH	<b>GA + CPB</b> <b>Lines</b> 16 G Lt Hand IV 20 G Lt Radial Artery 18 G Secalon in Femoral Triple Lumen in IJV <b>Induction</b> O <sub>2</sub> + Thio + Fenta + Mida + Pavl <b>Intubation</b> 7.5 mm ID Cuffed Portex <b>Maintenance</b> O <sub>2</sub> + N <sub>2</sub> O + Iso + Fenta + Mida + Pavl <b>CPB - 72' , ACC - 41'</b> <b>Supports</b> Adrenaline Shifted to CSICU For Elective Ventilation	ECG, SPO <sub>2</sub> , ETCO <sub>2</sub> , ABP, FIO <sub>2</sub> , Resp, AWP, CVP, Temp, Urine O/P, ACT, ABG	Dr Neema Dr Arun
24	09/03/05	Hamza K 236715 45 M	CAD , DVD	CABG	Dr JK Dr MM Dr CBP	<b>GA + CPB</b> <b>Lines</b> 16 G Lt Hand IV 20 G Lt Radial Artery Triple Lumen in IJV <b>Induction</b> O <sub>2</sub> + Thio + Fenta + Mida + Pavl <b>Intubation</b> 9.0 mm ID Cuffed Portex <b>Maintenance</b> O <sub>2</sub> + N <sub>2</sub> O + Iso + Fenta + Mida + Pavl <b>CPB - 96' , ACC - 37'</b> <b>Supports</b> Adrenaline	ECG, SPO <sub>2</sub> , ETCO <sub>2</sub> , ABP, FIO <sub>2</sub> , Resp, AWP, CVP, Temp, Urine O/P, ACT, ABG	Dr Hetal Dr Manjesh

						Dobutamine Shifted to CSICU For Elective Ventilation		
25	09/03/05	Syamala M 236301 48 F	Lt Bronchiogenic Carcinoma	Lt Pneumonectomy	Dr MUK Dr SP	<b>GA</b> <b>Lines</b> 16 G Lt Hand IV 20 G Lt Radial Artery Triple Lumen in IJV <b>Induction</b> O <sub>2</sub> + Thio + Fenta + Mida + Pavl <b>Intubation</b> 35 Fr Lt Endobronchial Tube <b>Fibre Optic Bronchoscopy</b> <b>Done.</b> <b>Maintenance</b> O <sub>2</sub> + N <sub>2</sub> O + Iso + Fenta + Mida + Pavl <b>Epidural Analgesia</b> Sensorcaine + Fenta Shifted to CSICU For Elective Ventilation	ECG, SPO <sub>2</sub> , ETCO <sub>2</sub> , ABP, FIO <sub>2</sub> , Resp, AWP, CVP, Temp, Urine O/P, ACT, ABG	Dr Subrat Dr Sunil
26	09/03/05	Mini V 8902365 27 F	Sev MS , Sev AS	DVR	Prof KSN Dr AKH	<b>GA + CPB</b> <b>Lines</b> 16 G Lt Hand IV 20 G Lt Radial Artery 18 G Secalon in Femoral Triple Lumen in IJV <b>Induction</b> O <sub>2</sub> + Thio + Fenta + Mida + Pavl <b>Intubation</b> 7.5 mm ID Cuffed Portex <b>Maintenance</b> O <sub>2</sub> + N <sub>2</sub> O + Iso + Fenta +	ECG, SPO <sub>2</sub> , ETCO <sub>2</sub> , ABP, FIO <sub>2</sub> , Resp, AWP, CVP, Temp, Urine O/P, ACT, ABG	Dr Suneel Dr Manjesh

						Mida + Pavl <b>CPB – 111’ , ACC – 80’</b> <b>Supports</b> Adrenaline Shifted to CSICU For Elective Ventilation		
27	10/03/05	Sudhamony V 9902529 22 M	ASD	ASD Closure	Prof KSN Dr AKH	<b>GA + CPB</b> <b>Lines</b> 16 G Lt Hand IV 20 G Lt Radial Artery Triple Lumen in IJV <b>Induction</b> O <sub>2</sub> + Thio + Fenta + Mida + Pavl <b>Intubation</b> 8.5 mm ID Cuffed Portex <b>Maintenance</b> O <sub>2</sub> + N <sub>2</sub> O + Iso + Fenta + Mida + Pavl <b>CPB – 30’ , ACC – 13’</b> Shifted to CSICU For Elective Ventilation	ECG, SPO <sub>2</sub> , ETCO <sub>2</sub> , ABP, FIO <sub>2</sub> , Resp, AWP, CVP, Temp, Urine O/P, ACT, ABG	Dr Hetal Dr Arun
28	10/03/05	Suresh M 228147 27 M	COA	COA Repair	Dr MUK Dr SP	<b>GA</b> <b>Lines</b> 16 G Lt Hand IV 20 G Lt Radial Artery 16 – 18 Cavafix <b>Induction</b> O <sub>2</sub> + Thio + Fenta + Mida + Pavl <b>Intubation</b> 37 Fr Lt Endobronchial Tube <b>Fibre Optic Bronchoscopy</b> <b>Done.</b> <b>Maintenance</b>	ECG, SPO <sub>2</sub> , ETCO <sub>2</sub> , ABP, FIO <sub>2</sub> , Resp, AWP, CVP, Temp, Urine O/P, ACT, ABG	Dr Suneel Dr Subrat

						O <sub>2</sub> + N <sub>2</sub> O + Iso + Fenta + Mida + Pavl <b>Epidural Analgesia</b> Sensorcaine + Fenta Shifted to CSICU For Elective Ventilation		
29	10/03/05	Kanakarajan 235933 54 M	CAD , DVD	CABG	Dr JK Dr MM	<b>GA + CPB</b> <b>Lines</b> 16 G Lt Hand IV 20 G Lt Radial Artery Triple Lumen in IJV <b>Induction</b> O <sub>2</sub> + Thio + Fenta + Mida + Morph + Pavl <b>Intubation</b> 9.0 mm ID Cuffed Portex <b>Maintenance</b> O <sub>2</sub> + N <sub>2</sub> O + Iso + Fenta + Mida + Pavl <b>CPB - 56' , ACC - 29'</b> <b>Supports</b> Adrenaline Dobutamine Shifted to CSICU For Elective Ventilation	ECG, SPO <sub>2</sub> , ETCO <sub>2</sub> , ABP, FIO <sub>2</sub> , Resp, AWP, CVP, Temp, Urine O/P, ACT, ABG	Dr Hetal Dr Subrat
30	11/03/05	Vinayababu 237528 63 M	CAD , TVD	CABG	Dr JK Dr MM	<b>GA + CPB</b> <b>Lines</b> 16 G Lt Hand IV 20 G Lt Radial Artery Triple Lumen in IJV <b>Induction</b> O <sub>2</sub> + Thio + Fenta + Mida + Morph + Pavl <b>Intubation</b> 9.0 mm ID Cuffed Portex	ECG, SPO <sub>2</sub> , ETCO <sub>2</sub> , ABP, FIO <sub>2</sub> , Resp, AWP, CVP, Temp, Urine O/P, ACT, ABG	Dr Suneel Dr Manjesh

						<b>Maintenance</b> O <sub>2</sub> + N <sub>2</sub> O + Iso + Fenta + Mida + Pavl <b>CPB</b> – 95', <b>ACC</b> – 62' <b>Supports</b> Adrenaline Shifted to CSICU For Elective Ventilation		
31	11/03/05	Anoj A 234293 20 M	LVOTO	Konno Procedure	Prof KSN Dr MM Dr SP	<b>GA + CPB</b> <b>Lines</b> 18 G Lt Hand IV 20 G Lt Radial Artery 16 G Secalon in Lt Femoral Artery Triple Lumen in IJV <b>Induction</b> O <sub>2</sub> + Thio + Fenta + Mida + Morph + Vecr <b>Intubation</b> 8.0 mm ID Cuffed Portex <b>Maintenance</b> O <sub>2</sub> + N <sub>2</sub> O + Iso + Fenta + Mida + Vecr <b>CPB</b> – 3 hrs, <b>ACC</b> – 2 hrs <b>Supports</b> Adrenaline Dobutamine Shifted to CSICU For Elective Ventilation	ECG, SPO <sub>2</sub> , ETCO <sub>2</sub> , ABP, FIO <sub>2</sub> , Resp, AWP, CVP, Temp, Urine O/P, ACT, ABG	Dr Sinha Dr Manjesh
32	11/03/05	Syamala R 252032 31 F	OS ASD	ASD Closure	Dr MM Dr CBP	<b>GA + CPB</b> <b>Lines</b> 16 G Lt Hand IV 20 G Lt Radial Artery Triple Lumen in IJV <b>Induction</b>	ECG, SPO <sub>2</sub> , ETCO <sub>2</sub> , ABP, FIO <sub>2</sub> , Resp, AWP, CVP, Temp, Urine O/P, ACT,	Dr Arun

						<p>O<sub>2</sub> + Thio + Fenta + Mida + Pavl  <b>Intubation</b>          7.5 mm ID Cuffed Portex  <b>Maintenance</b>          O<sub>2</sub> + N<sub>2</sub>O + Iso + Fenta + Mida + Pavl  <b>CPB – 45’ , ACC – 18’</b>          Shifted to CSICU For Elective Ventilation</p>	ABG	
33	14/03/05	Sadanandan K 235865 43 M	CAD , DVD	CABG	Dr JK Dr MM	<p><b>GA + CPB Lines</b>          16 G Lt Hand IV          20 G Lt Radial Artery          Triple Lumen in IJV  <b>Induction</b>          O<sub>2</sub> + Thio + Fenta + Mida + Morph + Pavl  <b>Intubation</b>          9.0 mm ID Cuffed Portex  <b>Maintenance</b>          O<sub>2</sub> + N<sub>2</sub>O + Iso + Fenta + Mida + Pavl  <b>CPB – 90’ , ACC – 62’</b>  <b>Supports</b>          Adrenaline          Shifted to CSICU For Elective Ventilation</p>	ECG, SPO <sub>2</sub> , ETCO <sub>2</sub> , ABP, FIO <sub>2</sub> , Resp, AWP, CVP, Temp, Urine O/P, ACT, ABG	Dr Hetal Dr Sunil
34	14/03/05	Sudheer P G 9205672 45 M	Sev MS	MVR	Prof KSN Dr CBP	<p><b>GA + CPB Lines</b>          18 G Lt Hand IV          20 G Lt Radial Artery          18 G Scalon in Lt Femoral Artery          Triple Lumen in IJV</p>	ECG, SPO <sub>2</sub> , ETCO <sub>2</sub> , ABP, FIO <sub>2</sub> , Resp, AWP, CVP, Temp, Urine O/P, ACT, ABG	Dr Neema Dr Hetal

						<b>Induction</b> O <sub>2</sub> + Thio + Fenta + Mida + Morph + Vecr <b>Intubation</b> 9.0 mm ID Cuffed Portex <b>Maintenance</b> O <sub>2</sub> + N <sub>2</sub> O + Iso + Fenta + Mida + Vecr <b>CPB</b> – 64', <b>ACC</b> – 29' <b>Supports</b> Adrenaline Dobutamine Shifted to CSICU For Elective Ventilation		
35	14/03/05	Padama R 251796 48 F	OS ASD	ASD Closure	Dr MM Dr AS	<b>GA + CPB Lines</b> 16 G Lt Hand IV 20 G Lt Radial Artery Triple Lumen in IJV <b>Induction</b> O <sub>2</sub> + Thio + Fenta + Mida + Pavl <b>Intubation</b> 7.5 mm ID Cuffed Portex <b>Maintenance</b> O <sub>2</sub> + N <sub>2</sub> O + Iso + Fenta + Mida + Pavl <b>CPB</b> – 33', <b>ACC</b> – 15' Shifted to CSICU For Elective Ventilation	ECG, SPO <sub>2</sub> , ETCO <sub>2</sub> , ABP, FIO <sub>2</sub> , Resp, AWP, CVP, Temp, Urine O/P, ACT, ABG	Dr Arun Dr Manjesh
36	14/03/05	Siyad V B 216948 22 M	Recurrent Rib Tumour	Excision	Prof KSN Dr SP	<b>GA Lines</b> 16 G Lt Hand IV 20 G Lt Radial Artery Triple Lumen in IJV	ECG, SPO <sub>2</sub> , ETCO <sub>2</sub> , ABP, FIO <sub>2</sub> , Resp, AWP, CVP, Temp, Urine	Dr Suneel Dr Hetal

						<b>Induction</b> O <sub>2</sub> + Thio + Fenta + Mida + Pavl <b>Intubation</b> 35 Fr Lt Endobronchial Tube <b>Fibre Optic Bronchoscopy Done.</b> <b>Maintenance</b> O <sub>2</sub> + N <sub>2</sub> O + Iso + Fenta + Mida + Pavl Shifted to CSICU For Elective Ventilation	O/P, ACT, ABG	
37	14/03/05 Emergency	Madhavan 9802122 64 M	CAD , TVD	CABG	Dr JK Dr MM	<b>GA + CPB Lines</b> 16 G Lt Hand IV 20 G Lt Radial Artery Triple Lumen in IJV <b>Induction</b> O <sub>2</sub> + Thio + Fenta + Mida + Morph + Pavl <b>Intubation</b> 9.0 mm ID Cuffed Portex <b>Maintenance</b> O <sub>2</sub> + N <sub>2</sub> O + Iso + Fenta + Mida + Pavl <b>CPB - 72' , ACC - 30'</b> <b>Supports</b> Adrenaline Shifted to CSICU For Elective Ventilation	ECG, SPO <sub>2</sub> , ETCO <sub>2</sub> , ABP, FIO <sub>2</sub> , Resp, AWP, CVP, Temp, Urine O/P, ACT, ABG	Dr Neema Dr Arun
38	15/03/05	Manikandan T 210261 29 M	Sev MS , Sev TR , Sev PAH	MVR	Prof KSN Dr CBP	<b>GA + CPB Lines</b> 16 G Lt Hand IV 20 G Lt Radial Artery 18 G Secalon in Lt Femoral	ECG, SPO <sub>2</sub> , ETCO <sub>2</sub> , ABP, FIO <sub>2</sub> , Resp, AWP, CVP, Temp, Urine	Dr Neema Dr Arun

						<p>Artery Triple Lumen in IJV <b>Induction</b> O<sub>2</sub> + Thio + Fenta + Mida + Morph + Pavl <b>Intubation</b> 9.0 mm ID Cuffed Portex <b>Maintenance</b> O<sub>2</sub> + N<sub>2</sub>O + Iso + Fenta + Mida + Pavl <b>CPB – 85’ , ACC – 45’</b> <b>Supports</b> Adrenaline Isoprenaline Shifted to CSICU For Elective Ventilation</p>	O/P, ACT, ABG	
39	15/03/05	Vikraman 234868 53 M	CAD , DVD	CABG	Dr JK Dr MM	<p><b>GA + CPB Lines</b> 16 G Lt Hand IV 20 G Lt Radial Artery Triple Lumen in IJV <b>Induction</b> O<sub>2</sub> + Thio + Fenta + Mida + Morph + Pavl <b>Intubation</b> 9.0 mm ID Cuffed Portex <b>Maintenance</b> O<sub>2</sub> + N<sub>2</sub>O + Iso + Fenta + Mida + Pavl <b>CPB – 118’ , ACC – 69’</b> Shifted to CSICU For Elective Ventilation</p>	ECG, SPO <sub>2</sub> , ETCO <sub>2</sub> , ABP, FIO <sub>2</sub> , Resp, AWP, CVP, Temp, Urine O/P, ACT, ABG	Dr Sunil Dr Manjesh
40	15/03/05	Salim M 234434 42 M	OS ASD	ASD Closure	Dr MM Dr CBP	<p><b>GA + CPB Lines</b> 16 G Lt Hand IV</p>	ECG, SPO <sub>2</sub> , ETCO <sub>2</sub> , ABP, FIO <sub>2</sub> , Resp,	Dr Arun Dr Manjesh

						20 G Lt Radial Artery Triple Lumen in IJV <b>Induction</b> O <sub>2</sub> + Thio + Fenta + Mida + Morph + Pavl <b>Intubation</b> 9.0 mm ID Cuffed Portex <b>Maintenance</b> O <sub>2</sub> + N <sub>2</sub> O + Iso + Fenta + Mida + Pavl CPB – 79', ACC – 29' Shifted to CSICU For Elective Ventilation	AWP, CVP, Temp, Urine O/P, ACT, ABG	
41	16/03/05	Kannan R 237815 53 M	Bronchigenic Carcinoma	Lt Upper Lobectomy	Dr MUK Dr SK	<b>GA Lines</b> 16 G Lt Hand IV 20 G Lt Radial Artery Triple Lumen in IJV <b>Induction</b> O <sub>2</sub> + Thio + Fenta + Mida + Pavl <b>Intubation</b> 37 Fr Rt Endobronchial Tube <b>Fibre Optic Bronchoscopy Done.</b> <b>Maintenance</b> O <sub>2</sub> + N <sub>2</sub> O + Iso + Fenta + Mida + Pavl <b>Epidural Analgesia</b> Sensorcaine + Fenta Shifted to CSICU For Elective Ventilation	ECG, SPO <sub>2</sub> , ETCO <sub>2</sub> , ABP, FIO <sub>2</sub> , Resp, AWP, CVP, Temp, Urine O/P, ACT, ABG	Dr Suneel -Dr Arun
42	16/03/05	Ahamed K 233472 50 M	Sev MS , Mild MR , Mild PAH	MVR	Prof KSN Dr AKH	<b>GA + CPB Lines</b> 16 G Lt Hand IV	ECG, SPO <sub>2</sub> , ETCO <sub>2</sub> , ABP, FIO <sub>2</sub> , Resp,	Dr Neema Dr Manjesh

						20 G Lt Radial Artery 18 G Secalon in Lt Femoral Artery Triple Lumen in IJV <b>Induction</b> O <sub>2</sub> + Thio + Fenta + Mida + Morph + Pavl <b>Intubation</b> 9.0 mm ID Cuffed Portex <b>Maintenance</b> O <sub>2</sub> + N <sub>2</sub> O + Iso + Fenta + Mida + Pavl <b>CPB - 85' , ACC - 45'</b> <b>Supports</b> Adrenaline Shifted to CSICU For Elective Ventilation	AWP, CVP, Temp, Urine O/P, ACT, ABG	
43	17/03/05	Elesy Thomas 9703120 36 F	Sev MR , Mod MS , Sev PAH	MVR	Prof KSN Dr RD	<b>GA + CPB Lines</b> 16 G Lt Hand IV 20 G Lt Radial Artery 14 GRt Hand IV Triple Lumen in IJV <b>Induction</b> O <sub>2</sub> + Thio + Fenta + Mida + Morph + Pavl <b>Intubation</b> 7.5 mm ID Cuffed Portex <b>Maintenance</b> O <sub>2</sub> + N <sub>2</sub> O + Iso + Fenta + Mida + Pavl <b>CPB - 90' , ACC - 40'</b> <b>Supports</b> Adrenaline Shifted to CSICU For	ECG, SPO <sub>2</sub> , ETCO <sub>2</sub> , ABP, FIO <sub>2</sub> , Resp, AWP, CVP, Temp, Urine O/P, ACT, ABG	Dr Neema Dr Manjesh

						Elective Ventilation		
44	17/03/05	Emilda M 203671 52 F	SV ASD	ASD Closure	Dr MM Dr NG	<b>GA + CPB</b> <b>Lines</b> 16 G Lt Hand IV 20 G Lt Radial Artery Triple Lumen in IJV <b>Induction</b> O <sub>2</sub> + Thio + Fenta + Mida + Morph + Pavl <b>Intubation</b> 7.0 mm ID Cuffed Portex <b>Maintenance</b> O <sub>2</sub> + N <sub>2</sub> O + Iso + Fenta + Mida + Pavl <b>CPB – 60'</b> , <b>ACC – 20'</b> Shifted to CSICU For Elective Ventilation	ECG, SPO <sub>2</sub> , ETCO <sub>2</sub> , ABP, FIO <sub>2</sub> , Resp, AWP, CVP, Temp, Urine O/P, ACT, ABG	Dr Sunil Dr Arun
45	17/03/05	Shaji Mathai 237406 38 M	Aorto – Iliac Block With Bilateral Renal Artery Stenosis	Bi Lateral AF Graft, Illeo – Renal Artery Grafting	Dr MUK Dr AS	<b>GA</b> <b>Lines</b> 16 G Lt Hand IV 20 G Lt Radial Artery Triple Lumen in IJV <b>Induction</b> O <sub>2</sub> + Thio + Fenta + Mida + Pavl <b>Intubation</b> 9.0 mm ID Cuffed Portex <b>Maintenance</b> O <sub>2</sub> + N <sub>2</sub> O + Iso + Fenta + Mida + Pavl <b>Epidural Analgesia</b> Sensorcaine + Fenta <b>Supports</b> Adrenaline Shifted to CSICU For	ECG, SPO <sub>2</sub> , ETCO <sub>2</sub> , ABP, FIO <sub>2</sub> , Resp, AWP, CVP, Temp, Urine O/P, ACT, ABG	Dr Sinha Dr Manjesh

46	18/03/05	Smitha D S 206885 23 F	OS ASD	ASD Closure	Prof KSN Dr SP	Elective Ventilation <b>GA + CPB</b> <b>Lines</b> 16 G Lt Hand IV 20 G Lt Radial Artery Triple Lumen in IJV <b>Induction</b> O <sub>2</sub> + Thio + Fenta + Mida + Morph + Pavl <b>Intubation</b> 7.0 mm ID Cuffed Portex <b>Maintenance</b> O <sub>2</sub> + N <sub>2</sub> O + Iso + Fenta + Mida + Pavl <b>CPB - 34' , ACC - 15'</b> Shifted to CSICU For Elective Ventilation	ECG, SPO <sub>2</sub> , ETCO <sub>2</sub> , ABP, FIO <sub>2</sub> , Resp, AWP, CVP, Temp, Urine O/P, ACT, ABG	Dr Suneel Dr Manjesh
47	18/03/05	Peethambaran 235351 73 M	CAD , DVD	CABG	Dr JK Dr MM	<b>GA + CPB</b> <b>Lines</b> 16 G Lt Hand IV 20 G Lt Radial Artery 14 GRt Hand IV Triple Lumen in IJV <b>Induction</b> O <sub>2</sub> + Thio + Fenta + Mida + Morph + Pavl <b>Intubation</b> 8.5 mm ID Cuffed Portex <b>Maintenance</b> O <sub>2</sub> + N <sub>2</sub> O + Iso + Fenta + Mida + Pavl <b>CPB - 82' , ACC - 43'</b> <b>Supports</b> Adrenaline Shifted to CSICU For	ECG, SPO <sub>2</sub> , ETCO <sub>2</sub> , ABP, FIO <sub>2</sub> , Resp, AWP, CVP, Temp, Urine O/P, ACT, ABG	Dr Hetal Dr Manjesh

48	18/03/05	Ambika P 198225 37 F	Sev MS , Mod MR , Mod TR , Sev PAH	MVR	Prof KSN Dr RD	<p>Elective Ventilation</p> <p><b>GA + CPB</b></p> <p><b>Lines</b> 16 G Lt Hand IV 20 G Lt Radial Artery 18 G Secalon in Lt Femoral Artery PA Catheter Was Put Triple Lumen in IJV</p> <p><b>Induction</b> O<sub>2</sub> + Thio + Fenta + Mida + Morph + Pavl</p> <p><b>Intubation</b> 7.5 mm ID Cuffed Portex</p> <p><b>Maintenance</b> O<sub>2</sub> + N<sub>2</sub>O + Iso + Fenta + Mida + Pavl CPB – 85° , ACC – 45°</p> <p><b>Supports</b> Adrenaline Shifted to CSICU For Elective Ventilation</p>	ECG, SPO <sub>2</sub> , ETCO <sub>2</sub> , ABP, FIO <sub>2</sub> , Resp, AWP, CVP, Temp, Urine O/P, ACT, ABG	Dr Neema Dr Arun
49	19/03/05	Rajamony N 237021 51 M	CAD , TVD	CABG	Dr JK Dr MM	<p><b>GA + CPB</b></p> <p><b>Lines</b> 16 G Lt Hand IV 20 G Lt Radial Artery 14 G Rt Hand IV Triple Lumen in IJV</p> <p><b>Induction</b> O<sub>2</sub> + Thio + Fenta + Mida + Morph + Pavl</p> <p><b>Intubation</b> 7.5 mm ID Cuffed Portex</p> <p><b>Maintenance</b> O<sub>2</sub> + N<sub>2</sub>O + Iso + Fenta +</p>	ECG, SPO <sub>2</sub> , ETCO <sub>2</sub> , ABP, FIO <sub>2</sub> , Resp, AWP, CVP, Temp, Urine O/P, ACT, ABG	Dr Hetal Dr Sunil

						Mida + Pavl <b>CPB – 104’ , ACC – 60’</b> <b>Supports</b> Adrenaline Shifted to CSICU For Elective Ventilation		
50	19/03/05	Mariyappan 236568 27 F	SV ASD	ASD Closure	Dr MM Dr SP	<b>GA + CPB</b> <b>Lines</b> 16 G Lt Hand IV 20 G Lt Radial Artery Triple Lumen in IJV <b>Induction</b> O <sub>2</sub> + Thio + Fenta + Mida + Morph + Pavl <b>Intubation</b> 8.5 mm ID Cuffed Portex <b>Maintenance</b> O <sub>2</sub> + N <sub>2</sub> O + Iso + Fenta + Mida + Pavl <b>CPB – 85’ , ACC – 23’</b> Shifted to CSICU For Elective Ventilation	ECG, SPO <sub>2</sub> , ETCO <sub>2</sub> , ABP, FIO <sub>2</sub> , Resp, AWP, CVP, Temp, Urine O/P, ACT, ABG	Dr Arun Dr Manjesh
51	01/04/05	Sreedevi K 236554 45 F	Ant Mediastinal Mass	Excision	Prof KSN Dr GSN	<b>GA</b> <b>Lines</b> 16 G Lt Hand IV 20 G Lt Radial Artery Triple Lumen in IJV <b>Induction</b> O <sub>2</sub> + Thio + Fenta + Mida + Pavl <b>Intubation</b> 37 Fr Rt Endobronchial Tube <b>Fibre Optic Bronchoscopy</b> <b>Done.</b> <b>Maintenance</b>	ECG, SPO <sub>2</sub> , ETCO <sub>2</sub> , ABP, FIO <sub>2</sub> , Resp, AWP, CVP, Temp, Urine O/P, ACT, ABG	Dr Suneel Dr Sunil

						<p>O<sub>2</sub> + N<sub>2</sub>O + Iso + Fenta + Mida + Pavl  <b>Epidural Analgesia</b>                  Sensorcaine + Fenta  <b>Supports</b>                  Adrenaline                  Shifted to CSICU For Elective Ventilation</p>		
52	01/04/05	Mahilamani 237223 45 M	Aorticroot Dialation	Bentall	Prof KSN Dr Chandra	<p><b>GA + CPB</b>  <b>Lines</b>                  16 G Lt Hand IV                  20 G Lt Radial Artery                  18 G Secalon In Femoral Artery                  14 G Rt Hand IV                  Triple Lumen in IJV                  PA Catheter Was Put  <b>Induction</b>                  O<sub>2</sub> + Thio + Fenta + Mida + Morph + Pavl  <b>Intubation</b>                  9.0 mm ID Cuffed Portex  <b>Maintenance</b>                  O<sub>2</sub> + N<sub>2</sub>O + Iso + Fenta + Mida + Pavl                  CPB -180°, ACC - 122°  <b>Supports</b>                  Adrenaline                  Shifted to CSICU For Elective Ventilation</p>	ECG, SPO <sub>2</sub> , ETCO <sub>2</sub> , ABP, FIO <sub>2</sub> , Resp, AWP, CVP, Temp, Urine O/P, ACT, ABG	Dr Suneel Dr Arun
53	02/04/05	Suma T 211769 38 F	OS ASD	ASD Closure	Prof KSN Dr RD	<p><b>GA + CPB</b>  <b>Lines</b>                  16 G Lt Hand IV                  20 G Lt Radial Artery                  Triple Lumen in IJV</p>	ECG, SPO <sub>2</sub> , ETCO <sub>2</sub> , ABP, FIO <sub>2</sub> , Resp, AWP, CVP, Temp, Urine	Dr Suneel Dr Arun

						<b>Induction</b> O <sub>2</sub> + Thio + Fenta + Mida + Morph + Pavl <b>Intubation</b> 7.5 mm ID Cuffed Portex <b>Maintenance</b> O <sub>2</sub> + N <sub>2</sub> O + Iso + Fenta + Mida + Pavl <b>CPB – 28’ , ACC – 12’</b> Shifted to CSICU For Elective Ventilation	O/P, ACT, ABG	
54	04/04/05	Sharma G S S 237058 62 M	CAD , TVD	CABG	Prof JK Dr MM	<b>GA + CPB Lines</b> 16 G Lt Hand IV 20 G Lt Radial Artery 14 G Rt Hand IV Triple Lumen in IJV <b>Induction</b> O <sub>2</sub> + Thio + Fenta + Mida + Morph + Pavl <b>Intubation</b> 8.5 mm ID Cuffed Portex <b>Maintenance</b> O <sub>2</sub> + N <sub>2</sub> O + Iso + Fenta + Mida + Pavl <b>CPB – 57’ , ACC – 30’</b> <b>Supports</b> Adrenaline Shifted to CSICU For Elective Ventilation	ECG, SPO <sub>2</sub> , ETCO <sub>2</sub> , ABP, FIO <sub>2</sub> , Resp, AWP, CVP, Temp, Urine O/P, ACT, ABG	Dr Subrat Dr Deepa
55	04/04/05	Joy P C 8909536 47 M	Sev MR , Mod MS , Sev AR , Mild AS , Mild PAH	DVR	Prof KSN Dr AS	<b>GA + CPB Lines</b> 16 G Lt Hand IV 20 G Lt Radial Artery 14 G Rt Hand IV	ECG, SPO <sub>2</sub> , ETCO <sub>2</sub> , ABP, FIO <sub>2</sub> , Resp, AWP, CVP, Temp, Urine	Dr Neema Dr Arun

						<p>Triple Lumen in IJV</p> <p><b>Induction</b> O<sub>2</sub> + Thio + Fenta + Mida + Morph + Pavl</p> <p><b>Intubation</b> 9.0 mm ID Cuffed Portex</p> <p><b>Maintenance</b> O<sub>2</sub> + N<sub>2</sub>O + Iso + Fenta + Mida + Pavl</p> <p><b>CPB</b> – 117', <b>ACC</b> – 71'</p> <p><b>Supports</b> Adrenaline</p> <p>Shifted to CSICU For Elective Ventilation</p>	O/P, ACT, ABG	
56	05/04/05	Mini K M 233012 34 F	Sev AR	AVR	Prof KSN Dr AKH	<p><b>GA + CPB Lines</b> 16 G Lt Hand IV 20 G Lt Radial Artery 14 G Rt Hand IV Triple Lumen in IJV</p> <p><b>Induction</b> O<sub>2</sub> + Thio + Fenta + Mida + Morph + Pavl</p> <p><b>Intubation</b> 7.5 mm ID Cuffed Portex</p> <p><b>Maintenance</b> O<sub>2</sub> + N<sub>2</sub>O + Iso + Fenta + Mida + Pavl</p> <p><b>CPB</b> – 63', <b>ACC</b> – 47'</p> <p><b>Supports</b> Adrenaline</p> <p>Shifted to CSICU For Elective Ventilation</p>	ECG, SPO <sub>2</sub> , ETCO <sub>2</sub> , ABP, FIO <sub>2</sub> , Resp, AWP, CVP, Temp, Urine O/P, ACT, ABG	Dr Neema Dr Deepa
57	05/04/05	Sasi K 237740	CAD, DVD	CABG	Prof JK Dr MM	<p><b>GA + CPB Lines</b></p>	ECG, SPO <sub>2</sub> , ETCO <sub>2</sub> , ABP,	Dr Subrat Dr Bhupesh

		46 M				16 G Lt Hand IV 20 G Lt Radial Artery 14 G Rt Hand IV Triple Lumen in IJV <b>Induction</b> O <sub>2</sub> + Thio + Fenta + Mida + Morph + Pavl <b>Intubation</b> 8.5 mm ID Cuffed Portex <b>Maintenance</b> O <sub>2</sub> + N <sub>2</sub> O + Iso + Fenta + Mida + Pavl <b>CPB</b> – 146', <b>ACC</b> – 100' <b>Supports</b> Adrenaline Shifted to CSICU For Elective Ventilation	FIO <sub>2</sub> , Resp, AWP, CVP, Temp, Urine O/P, ACT, ABG	
58	06/04/05	Girija S 237214 35 M	OS ASD	ASD Closure	Dr MM Dr AS	<b>GA + CPB Lines</b> 16 G Lt Hand IV 20 G Lt Radial Artery Triple Lumen in IJV <b>Induction</b> O <sub>2</sub> + Thio + Fenta + Mida + Morph + Pavl <b>Intubation</b> 7.5 mm ID Cuffed Portex <b>Maintenance</b> O <sub>2</sub> + N <sub>2</sub> O + Iso + Fenta + Mida + Pavl <b>CPB</b> – 28', <b>ACC</b> – 12' Shifted to CSICU For Elective Ventilation	ECG, SPO <sub>2</sub> , ETCO <sub>2</sub> , ABP, FIO <sub>2</sub> , Resp, AWP, CVP, Temp, Urine O/P, ACT, ABG	Dr Arun Dr Bhupesh
59	06/04/05	Sekharan K R 237499	CAD, TVD	CABG	Prof JK Dr MM	<b>GA + CPB Lines</b>	ECG, SPO <sub>2</sub> , ETCO <sub>2</sub> , ABP,	Dr Unni Dr Deepa

		55 M				<p>16 G Lt Hand IV                  20 G Lt Radial Artery                  14 G Rt Hand IV                  Triple Lumen in IJV  <b>Induction</b>                  O<sub>2</sub> + Thio + Fenta + Mida + Morph + Pavl  <b>Intubation</b>                  8.5 mm ID Cuffed Portex  <b>Maintenance</b>                  O<sub>2</sub> + N<sub>2</sub>O + Iso + Fenta + Mida + Pavl  <b>CPB</b> – 83', <b>ACC</b> – 48'  <b>Supports</b>                  Adrenaline                  Shifted to CSICU For Elective Ventilation</p>	<p>FIO<sub>2</sub>, Resp,                  AWP, CVP,                  Temp, Urine                  O/P, ACT,                  ABG</p>	
60	07/04/05	Indhulekha P 219573 36 F	Sev MS , Sev MR	MVR	Prof KSN Dr CBP	<p><b>GA + CPB Lines</b>                  16 G Lt Hand IV                  20 G Lt Radial Artery                  18 G Secalon in Femoral                  Triple Lumen in IJV  <b>Induction</b>                  O<sub>2</sub> + Thio + Fenta + Mida + Morph + Pavl  <b>Intubation</b>                  7.5 mm ID Cuffed Portex  <b>Maintenance</b>                  O<sub>2</sub> + N<sub>2</sub>O + Iso + Fenta + Mida + Pavl  <b>CPB</b> – 47', <b>ACC</b> – 31'  <b>Supports</b>                  Adrenaline                  Shifted to CSICU For</p>	<p>ECG, SPO<sub>2</sub>,                  ETCO<sub>2</sub> , ABP,                  FIO<sub>2</sub>, Resp,                  AWP, CVP,                  Temp, Urine                  O/P, ACT,                  ABG</p>	<p>Dr Néema                  Dr Bhupesh</p>

						Elective Ventilation		
61	07/04/05	Sukumaran R 208417 79 M	CAD , TVD	CABG	Prof JK Dr MM	<p><b>GA + CPB</b>  <b>Lines</b>                      16 G Lt Hand IV                      20 G Lt Radial Artery                      14 G Rt Hand IV                      Triple Lumen in IJV  <b>Induction</b>                      O<sub>2</sub> + Thio + Fenta + Mida + Morph + Pavl  <b>Intubation</b>                      9.0 mm ID Cuffed Portex  <b>Maintenance</b>                      O<sub>2</sub> + N<sub>2</sub>O + Iso + Fenta + Mida + Pavl                      CPB – 106’ , ACC – 75’  <b>Supports</b>                      Adrenaline                      Shifted to CSICU For Elective Ventilation</p>	ECG, SPO <sub>2</sub> , ETCO <sub>2</sub> , ABP, FIO <sub>2</sub> , Resp, AWP, CVP, Temp, Urine O/P, ACT, ABG	Dr Manikandan Dr Arun
62	08/04/05	Sajikumar 216627 12 M	OS ASD	ASD Closure	Dr MM Dr CBP	<p><b>GA + CPB</b>  <b>Lines</b>                      16 G Lt Hand IV                      20 G Lt Radial Artery                      Triple Lumen in IJV  <b>Induction</b>                      O<sub>2</sub> + Thio + Fenta + Mida + Morph + Pavl  <b>Intubation</b>                      8.0 mm ID Cuffed Portex  <b>Maintenance</b>                      O<sub>2</sub> + N<sub>2</sub>O + Iso + Fenta + Mida + Pavl                      CPB – 28’ , ACC – 12’                      Shifted to CSICU For</p>	ECG, SPO <sub>2</sub> , ETCO <sub>2</sub> , ABP, FIO <sub>2</sub> , Resp, AWP, CVP, Temp, Urine O/P, ACT, ABG	Dr Surat Dr Bhupesh

63	08/04/05	Raju P D 23726 45 M	Sev MR	MVR	Prof KSN Dr AS	<p>Elective Ventilation</p> <p><b>GA + CPB</b></p> <p><b>Lines</b> 16 G Lt Hand IV 20 G Lt Radial Artery 18 G Secalon in Femoral Triple Lumen in IJV</p> <p><b>Induction</b> O<sub>2</sub> + Thio + Fenta + Mida + Morph + Pavl</p> <p><b>Intubation</b> 9.0 mm ID Cuffed Portex</p> <p><b>Maintenance</b> O<sub>2</sub> + N<sub>2</sub>O + Iso + Fenta + Mida + Pavl</p> <p><b>CPB – 47’ , ACC – 31’</b></p> <p><b>Supports</b> Adrenaline Shifted to CSICU For Elective Ventilation</p>	ECG, SPO <sub>2</sub> , ETCO <sub>2</sub> , ABP, FIO <sub>2</sub> , Resp, AWP, CVP, Temp, Urine O/P, ACT, ABG	Dr Unni Dr Deepa
64	11/04/05	Syam P 9302809 15 M	OS ASD	ASD Closure	Prof KSN Dr RD	<p><b>GA + CPB</b></p> <p><b>Lines</b> 16 G Lt Hand IV 20 G Lt Radial Artery Triple Lumen in IJV</p> <p><b>Induction</b> O<sub>2</sub> + Thio + Fenta + Mida + Morph + Pavl</p> <p><b>Intubation</b> 8.0 mm ID Cuffed Portex</p> <p><b>Maintenance</b> O<sub>2</sub> + N<sub>2</sub>O + Iso + Fenta + Mida + Pavl</p> <p><b>CPB – 28’ , ACC – 12’</b> Shifted to CSICU For</p>	ECG, SPO <sub>2</sub> , ETCO <sub>2</sub> , ABP, FIO <sub>2</sub> , Resp, AWP, CVP, Temp, Urine O/P, ACT, ABG	Dr Subrat Dr Bhupesh

65	11/04/05	Muthuselvi S 232951 22 M	Sev MR	MVR	Dr MM Dr AKH	<b>Elective Ventilation</b> <b>GA + CPB</b> <b>Lines</b> 16 G Lt Hand IV 20 G Lt Radial Artery 18 G Secalon in Femoral Triple Lumen in IJV <b>Induction</b> O <sub>2</sub> + Thio + Fenta + Mida + Morph + Pavl <b>Intubation</b> 7.5 mm ID Cuffed Portex <b>Maintenance</b> O <sub>2</sub> + N <sub>2</sub> O + Iso + Fenta + Mida + Pavl CPB – 90', ACC – 47' <b>Supports</b> Adrenaline Shifted to CSICU For Elective Ventilation	ECG, SPO <sub>2</sub> , ETCO <sub>2</sub> , ABP, FIO <sub>2</sub> , Resp, AWP, CVP, Temp, Urine O/P, ACT, ABG	Dr Manikandan Dr Deepa
66	12/04/05	Vinu S 220075 22 M	Sev MR	MVR	Dr MM Dr AS	<b>GA + CPB</b> <b>Lines</b> 16 G Lt Hand IV 20 G Lt Radial Artery Triple Lumen in IJV <b>Induction</b> O <sub>2</sub> + Thio + Fenta + Mida + Morph.+ Pavl <b>Intubation</b> 9.0 mm ID Cuffed Portex <b>Maintenance</b> O <sub>2</sub> + N <sub>2</sub> O + Iso + Fenta + Mida + Pavl CPB – 116', ACC – 76' <b>Supports</b>	ECG, SPO <sub>2</sub> , ETCO <sub>2</sub> , ABP, FIO <sub>2</sub> , Resp, AWP, CVP, Temp, Urine O/P, ACT, ABG	Dr Neema Dr Bhupesh

						Adrenaline Shifted to CSICU For Elective Ventilation		
67	12/04/05	Kunhammu K 235197 52 M	Rt Bronchigenic Carcinoma	Rt Pnemonectomy	Prof MUK Dr GSN	<b>GA</b> <b>Lines</b> 16 G Lt Hand IV 20 G Lt Radial Artery Triple Lumen in IJV <b>Induction</b> O <sub>2</sub> + Thio + Fenta + Mida + Pavl <b>Intubation</b> 37 Fr Rt Endobronchial Tube <b>Fibre Optic Bronchoscopy</b> <b>Done.</b> <b>Maintenance</b> O <sub>2</sub> + N <sub>2</sub> O + Iso + Fenta + Mida + Pavl <b>Epidural Analgesia</b> Sensorcaine + Fenta Shifted to CSICU For Elective Ventilation	ECG, SPO <sub>2</sub> , ETCO <sub>2</sub> , ABP, FIO <sub>2</sub> , Resp, AWP, CVP, Temp, Urine O/P, ACT, ABG	Dr Subrat Dr Bhupesh
68	13/04/05	Nasiya Beevi 9208085 26 F	OS ASD	ASD Closure	Prof KSN Dr AKH	<b>GA + CPB</b> <b>Lines</b> 16 G Lt Hand IV 20 G Lt Radial Artery Triple Lumen in IJV <b>Induction</b> O <sub>2</sub> + Thio + Fenta + Mida + Morph + Pavl <b>Intubation</b> 7.5 mm ID Cuffed Portex <b>Maintenance</b> O <sub>2</sub> + N <sub>2</sub> O + Iso + Fenta +	ECG, SPO <sub>2</sub> , ETCO <sub>2</sub> , ABP, FIO <sub>2</sub> , Resp, AWP, CVP, Temp, Urine O/P, ACT, ABG	Dr Unni Dr Deepa

						Mida + Pavl CPB – 75' , ACC – 46' <b>Supports</b> Adrenaline SNP Shifted to CSICU For Elective Ventilation		
69	27/04/05	Sankaran N 239408 64 M	TAAA Type□	Repair	Prof MUK Dr RD	<b>GA</b> <b>Lines</b> 16 G Lt Hand IV 20 G Lt Radial Artery Triple Lumen in IJV <b>Induction</b> O <sub>2</sub> + Thio + Fenta + Mida + Pavl <b>Intubation</b> 39 Fr Rt Endobronchial Tube <b>Fibre Optic Bronchoscopy</b> <b>Done.</b> <b>Maintenance</b> O <sub>2</sub> + N <sub>2</sub> O + Iso + Fenta + Mida + Pavl <b>Epidural Analgesia</b> Sensorcaine + Fenta Shifted to CSICU For Elective Ventilation	ECG, SPO <sub>2</sub> , ETCO <sub>2</sub> , ABP, FIO <sub>2</sub> , Resp, AWP, CVP, Temp, Urine O/P, ACT, ABG	Dr Neema Dr Arun
70	30/04/05	Lakshmanan 237055 57 M	CAD , DVD	CABG	Prof JK Dr MM	<b>GA + CPB</b> <b>Lines</b> 16 G Lt Hand IV 20 G Lt Radial Artery 14 G Rt Hand IV Triple Lumen in IJV <b>Induction</b> O <sub>2</sub> + Thio + Fenta + Mida + Morph + Pavl	ECG, SPO <sub>2</sub> , ETCO <sub>2</sub> , ABP, FIO <sub>2</sub> , Resp, AWP, CVP, Temp, Urine O/P, ACT, ABG	Dr Subrat Dr Deepa

						<b>Intubation</b> 9.0 mm ID Cuffed Portex <b>Maintenance</b> O <sub>2</sub> + N <sub>2</sub> O + Iso + Fenta + Mida + Pavl <b>CPB – 106’ , ACC – 75’</b> <b>Supports</b> Adrenaline Shifted to CSICU For Elective Ventilation		
71	01/03/06	Jayachandran 248052 48 M	CAD , DVD	CABG	Prof JK Dr MM	<b>GA + CPB</b> <b>Lines</b> 16 G Lt Hand IV 20 G Lt Radial Artery 14 G Rt Hand IV Triple Lumen in IJV <b>Induction</b> O <sub>2</sub> + Thio + Fenta + Mida + Morph + Pavl <b>Intubation</b> 9.0 mm ID Cuffed Portex <b>Maintenance</b> O <sub>2</sub> + N <sub>2</sub> O + Iso + Fenta + Mida + Pavl <b>CPB – 94’ , ACC – 55’</b> <b>Supports</b> Adrenaline Shifted to CSICU For Elective Ventilation	ECG, SPO <sub>2</sub> , ETCO <sub>2</sub> , ABP, FIO <sub>2</sub> , Resp, AWP, CVP, Temp, Urine O/P, ACT, ABG	Dr Sinha Dr S Patro
72	01/03/06	Suryakala P 8908694 30 F	OS ASD	ASD Closure	Dr SP Dr SKP	<b>GA + CPB</b> <b>Lines</b> 16 G Lt Hand IV 20 G Lt Radial Artery Triple Lumen in IJV <b>Induction</b>	ECG, SPO <sub>2</sub> , ETCO <sub>2</sub> , ABP, FIO <sub>2</sub> , Resp, AWP, CVP, Temp, Urine O/P, ACT,	Dr Unni Dr S Patro

						<p>O<sub>2</sub> + Thio + Fenta + Mida + Morph + Pavl  <b>Intubation</b>  7.5 mm ID Cuffed Portex  <b>Maintenance</b>  O<sub>2</sub> + N<sub>2</sub>O + Iso + Fenta + Mida + Pavl  <b>CPB – 42’ , ACC – 18’</b>  Shifted to CSICU For Elective Ventilation</p>	ABG	
73	02/03/06	Sudharma 6755 70 M	CAD , DVD	CABG	Prof JK Dr MM	<p><b>GA + CPB Lines</b>  16 G Lt Hand IV  20 G Lt Radial Artery  14 G Rt Hand IV  Triple Lumen in IJV  PICCO Catheter Was Put  <b>Induction</b>  O<sub>2</sub> + Thio + Fenta + Mida + Morph + Pavl  <b>Intubation</b>  7.5 mm ID Cuffed Portex  <b>Maintenance</b>  O<sub>2</sub> + N<sub>2</sub>O + Iso + Fenta + Mida + Pavl  <b>CPB – 106’ , ACC – 75’</b>  <b>Supports</b>  Adrenaline  Shifted to CSICU For Elective Ventilation</p>	ECG, SPO <sub>2</sub> , ETCO <sub>2</sub> , ABP, FIO <sub>2</sub> , Resp, AWP, CVP, Temp, Urine O/P, ACT, ABG	Dr Shrinivas Dr Sivakumar
74	02/03/06	Ajmal Shah 244837 5 M	PDA	PDA Ligation	Prof MUK Dr RD	<p><b>GA Lines</b>  20 G Lt Hand IV  18 G Lt Radial Artery  Triple Lumen in Femoral</p>	ECG, SPO <sub>2</sub> , ETCO <sub>2</sub> , ABP, FIO <sub>2</sub> , Resp, AWP, CVP, Temp, Urine	Dr Sinha Dr Bhupesh

						<p><b>Induction</b> O<sub>2</sub> + Sevo + Fenta + Mida + Morph + Pavl</p> <p><b>Intubation</b> 5.0 mm ID Cuffed Portex</p> <p><b>Maintenance</b> O<sub>2</sub> + N<sub>2</sub>O + Iso + Fenta + Mida + Pavl</p> <p>Shifted to CSICU For Elective Ventilation</p>	O/P, ACT, ABG	
74	02/03/06	Robin S M 247486 65 M	CAD , DVD	CABG	Prof JK Dr MM	<p><b>GA + CPB</b></p> <p><b>Lines</b> 16 G Lt Hand IV 20 G Lt Radial Artery 14 G Rt Hand IV Triple Lumen in IJV PICCO Catheter Was Put</p> <p><b>Induction</b> O<sub>2</sub> + Thio + Fenta + Mida + Morph + Pavl</p> <p><b>Intubation</b> 8.5 mm ID Cuffed Portex</p> <p><b>Maintenance</b> O<sub>2</sub> + N<sub>2</sub>O + Iso + Fenta + Mida + Pavl</p> <p><b>CPB – 90° , ACC – 56°</b></p> <p><b>Supports</b> Adrenaline</p> <p>Shifted to CSICU For Elective Ventilation</p>	ECG, SPO <sub>2</sub> , ETCO <sub>2</sub> , ABP, FIO <sub>2</sub> , Resp, AWP, CVP, Temp, Urine O/P, ACT, ABG	Dr Sinha Dr Bhupesh
75	03/03/06	Velayudhan P 249408 76 M	Femoral Artery Pseudo Aneurysm	Repair	Prof MUK Dr GSN	<p><b>GA</b></p> <p><b>Lines</b> 16 G Lt Hand IV 20 G Lt Radial Artery 14 G Rt Hand IV</p>	ECG, SPO <sub>2</sub> , ETCO <sub>2</sub> , ABP, FIO <sub>2</sub> , Resp, AWP, CVP, Temp, Urine	Dr Shrinivas Dr Bhupesh

						Triple Lumen in IJV <b>Induction</b> O <sub>2</sub> + Thio + Fenta + Mida + Morph + Pavl <b>Intubation</b> 9.0 mm ID Cuffed Portex <b>Maintenance</b> O <sub>2</sub> + N <sub>2</sub> O + Iso + Fenta + Mida + Pavl <b>Epidural Analgesia</b> Sensorcaine + Fenta Shifted to CSICU For Elective Ventilation	O/P, ACT, ABG	
76	03/03/06	Natarajan C G 243478 64 M	Sev AR , CAD , DVD	AVR + CABG	Prof JK Dr MM Dr RR	<b>GA + CPB Lines</b> 16 G Lt Hand IV 20 G Lt Radial Artery 14 G Rt Hand IV Triple Lumen in IJV PICCO Catheter Was Put <b>Induction</b> O <sub>2</sub> + Thio + Fenta + Mida + Morph + Pavl <b>Intubation</b> 8.5 mm ID Cuffed Portex <b>Maintenance</b> O <sub>2</sub> + N <sub>2</sub> O + Iso + Fenta + Mida + Pavl <b>CPB - 141' , ACC - 100'</b> <b>Supports</b> Adrenaline Shifted to CSICU For Elective Ventilation	ECG, SPO <sub>2</sub> , ETCO <sub>2</sub> , ABP, FIO <sub>2</sub> , Resp, AWP, CVP, Cardiac O/ P , Temp, Urine O/P, Haemochron ACT, ABG	Dr Unni Dr Bhupesh
77	06/03/06	Ashraf M P 240304	Myestheniagravis , Hypothyroidism	Thymectomy	Prof MUK Dr GSN	<b>GA Lines</b>	ECG, SPO <sub>2</sub> , ETCO <sub>2</sub> , ABP,	Prof Rupa Dr Bhupesh

		47 M				16 G Lt Hand IV 20 G Lt Radial Artery Triple Lumen in IJV <b>Induction</b> O <sub>2</sub> + Thio + Fenta + Mida + Morph + Pavl <b>Intubation</b> 9.0 mm ID Cuffed Portex <b>Maintenance</b> O <sub>2</sub> + N <sub>2</sub> O + Iso + Fenta + Mida + Pavl <b>Epidural Analgesia</b> Sensorcaine + Fenta Shifted to CSICU For Elective Ventilation	FIO <sub>2</sub> , Resp, AWP, CVP, Temp, Urine O/P, ABG	
78	06/03/06	Mohanakumar 248897 46 M	CAD , DVD	CABG	Prof JK Dr SP	<b>GA + CPB Lines</b> 16 G Lt Hand IV 20 G Lt Radial Artery 14 G Rt Hand IV Triple Lumen in IJV <b>Induction</b> O <sub>2</sub> + Thio + Fenta + Mida + Morph + Pavl <b>Intubation</b> 9.0 mm ID Cuffed Portex <b>Maintenance</b> O <sub>2</sub> + N <sub>2</sub> O + Iso + Fenta + Mida + Pavl <b>CPB – 57' , ACC – 35'</b> <b>Supports</b> Adrenaline Shifted to CSICU For Elective Ventilation	ECG, SPO <sub>2</sub> , ETCO <sub>2</sub> , ABP, FIO <sub>2</sub> , Resp, AWP, CVP, Cardiac O/ P , Temp, Urine O/P, ACT, ABG	Dr Unni Dr Bhupesh
79	07/03/06	Pouly Joseph	OS ASD	ASD Closure	Dr SP	<b>GA + CPB</b>	ECG, SPO <sub>2</sub> ,	Prof Rupa

		245502 24 F			Dr RR	<b>Lines</b> 16 G Lt Hand IV 20 G Lt Radial Artery Triple Lumen in IJV <b>Induction</b> O <sub>2</sub> + Thio + Fenta + Mida + Morph + Pavl <b>Intubation</b> 7.5 mm ID Cuffed Portex <b>Maintenance</b> O <sub>2</sub> + N <sub>2</sub> O + Iso + Fenta + Mida + Pavl <b>CPB - 52'</b> , <b>ACC - 20'</b> Shifted to CSICU For Elective Ventilation	ETCO <sub>2</sub> , ABP, FIO <sub>2</sub> , Resp, AWP, CVP, Temp, Urine O/P, ACT, ABG	Dr Bhupesh
80	07/03/06	Vasoodevan G 247009 47 M	CAD , DVD	CABG	Prof JK Dr RD	<b>GA + CPB</b> <b>Lines</b> 16 G Lt Hand IV 20 G Lt Radial Artery 14 G Rt Hand IV Triple Lumen in IJV <b>Induction</b> O <sub>2</sub> + Thio + Fenta + Mida + Morph + Pavl <b>Intubation</b> 9.0 mm ID Cuffed Portex <b>Maintenance</b> O <sub>2</sub> + N <sub>2</sub> O + Iso + Fenta + Mida + Pavl <b>CPB - 106'</b> , <b>ACC - 61'</b> <b>Supports</b> Adrenaline Shifted to CSICU For Elective Ventilation	ECG, SPO <sub>2</sub> , ETCO <sub>2</sub> , ABP, FIO <sub>2</sub> , Resp, AWP, CVP, Temp, Urine O/P, ACT, ABG	Prof Rupa Dr Bhupesh
81	08/03/06	Rosmma J	Sev MS	MVR	Dr MM	<b>GA + CPB</b>	ECG, SPO <sub>2</sub> ,	Dr Sinha

		246470 55 F			Dr AS	<b>Lines</b> 16 G Lt Hand IV 20 G Lt Radial Artery 18 G Secalon in Lt Femoral Artery Triple Lumen in IJV <b>Induction</b> O <sub>2</sub> + Thio + Fenta + Mida + Morph + Pavl <b>Intubation</b> 7.5 mm ID Cuffed Portex <b>Maintenance</b> O <sub>2</sub> + N <sub>2</sub> O + Iso + Fenta + Mida + Pavl <b>CPB</b> – 90', <b>ACC</b> – 61' <b>Supports</b> Adrenaline Shifted to CSICU For Elective Ventilation	ETCO <sub>2</sub> , ABP, FIO <sub>2</sub> , Resp, AWP, CVP, Temp, Urine O/P, ACT, ABG	Dr Bhupesh
82	08/03/06	Khaleed E 242729 55 M	CAD, DVD	CABG	Prof JK Dr SKP Dr RR	<b>GA + CPB</b> <b>Lines</b> 16 G Lt Hand IV 20 G Lt Radial Artery 14 G Rt Hand IV Triple Lumen in IJV <b>Induction</b> O <sub>2</sub> + Thio + Fenta + Mida + Morph + Pavl <b>Intubation</b> 9.0 mm ID Cuffed Portex <b>Maintenance</b> O <sub>2</sub> + N <sub>2</sub> O + Iso + Fenta + Mida + Pavl <b>CPB</b> – 68' <b>Supports</b>	ECG, SPO <sub>2</sub> , ETCO <sub>2</sub> , ABP, FIO <sub>2</sub> , Resp, AWP, CVP, Temp, Urine O/P, ACT, ABG	Prof Rupa Dr Siva

						Adrenaline Shifted to CSICU For Elective Ventilation		
83	09/03/06	Krishnan P K 249999 49 M	CAD , TVD	CABG	Prof JK Dr RD	<b>GA + CPB</b> <b>Lines</b> 16 G Lt Hand IV 20 G Lt Radial Artery Triple Lumen in IJV <b>Induction</b> O <sub>2</sub> + Thio + Fenta + Mida + Morph + Pavl <b>Fibre Optic Bronchoscopy</b> <b>Intubation</b> 9.0 mm ID Cuffed Portex <b>Maintenance</b> O <sub>2</sub> + N <sub>2</sub> O + Iso + Fenta + Mida + Pavl <b>CPB – 119' , ACC – 51'</b> <b>Supports</b> Adrenaline Shifted to CSICU For Elective Ventilation	ECG, SPO <sub>2</sub> , ETCO <sub>2</sub> , ABP, FIO <sub>2</sub> , Resp, AWP, CVP, Temp, Urine O/P, ACT, ABG	Dr Mani Dr S Patro
84	10/03/06	Krishnan S 247022 22 M	ASD , Mild PAH	ASD Closure	Dr SKP Dr SG	<b>GA + CPB</b> <b>Lines</b> 16 G Lt Hand IV 20 G Lt Radial Artery Triple Lumen in IJV <b>Induction</b> O <sub>2</sub> + Thio + Fenta + Mida + Morph + Pavl <b>Intubation</b> 9.0 mm ID Cuffed Portex <b>Maintenance</b> O <sub>2</sub> + N <sub>2</sub> O + Iso + Fenta + Mida + Pavl	ECG, SPO <sub>2</sub> , ETCO <sub>2</sub> , ABP, FIO <sub>2</sub> , Resp, AWP, CVP, Temp, Urine O/P, ACT, ABG	Dr Sinha Dr S Patro

						CPB – 55', ACC – 23' Shifted to CSICU For Elective Ventilation		
85	11/03/06	Prasad S 241367 32 M	SV ASD , Sev MR , Sev PAH	MVR + ASD Closure	Prof RSK Dr RR	<b>GA + CPB Lines</b> 16 G Lt Hand IV 20 G Lt Radial Artery 14 G Rt Hand IV Triple Lumen in IJV <b>Induction</b> O <sub>2</sub> + Thio + Fenta + Mida + Morph + Pavl <b>Intubation</b> 9.0 mm ID Cuffed Portex <b>Maintenance</b> O <sub>2</sub> + N <sub>2</sub> O + Iso + Fenta + Mida + Pavl CPB – 189' , ACC – 115' <b>Supports</b> Adrenaline Milrinone Shifted to CSICU For Elective Ventilation	ECG, SPO <sub>2</sub> , ETCO <sub>2</sub> , ABP, FIO <sub>2</sub> , Resp, AWP, CVP, Temp, Urine O/P, Haemochron ACT, ABG	Dr Shrinivas Dr S Patro
86	14/03/06	Surendran S 214772 46 M	Sev AS , Mod AR	AVR	Dr MM Dr AS	<b>GA + CPB Lines</b> 16 G Lt Hand IV 20 G Lt Radial Artery 14 G Rt Hand IV 18 G Secalon in Femoral Artery Triple Lumen in IJV <b>Induction</b> O <sub>2</sub> + Thio + Fenta + Mida + Morph + Pavl <b>Intubation</b>	ECG, SPO <sub>2</sub> , ETCO <sub>2</sub> , ABP, FIO <sub>2</sub> , Resp, AWP, CVP, Temp, Urine O/P, Haemochron ACT, ABG	Dr Unni Dr Siva

						9.0 mm ID Cuffed Portex <b>Maintenance</b> O <sub>2</sub> + N <sub>2</sub> O + Iso + Fenta + Mida + Pavl <b>CPB – 112’ , ACC – 75’</b> <b>Supports</b> Adrenaline Shifted to CSICU For Elective Ventilation		
87	14/03/06	Nityanandan 249323 33 M	Lt Bronchial Adenoma	Lt Upper Lobectomy	Prof MUK Dr GSN	<b>GA Lines</b> 16 G Lt Hand IV 20 G Lt Radial Artery Triple Lumen in IJV <b>Induction</b> O <sub>2</sub> + Thio + Fenta + Mida + Pavl <b>Intubation</b> 37 Fr Rt Endobronchial Tube <b>Fibre Optic Bronchoscopy Done.</b> <b>Maintenance</b> O <sub>2</sub> + N <sub>2</sub> O + Iso + Fenta + Mida + Pavl <b>Epidural Analgesia</b> Sensorcaine + Fenta Shifted to CSICU For Elective Ventilation	ECG, SPO <sub>2</sub> , ETCO <sub>2</sub> , ABP, FIO <sub>2</sub> , Resp, AWP, CVP, Temp, Urine O/P, ABG	Dr Shrinivas Dr Siva
88	15/03/06	Yakoob Basha 243646 55 M	CAD , Good LV Function	CABG	Prof JK Dr MM Dr AKH	<b>GA + CPB Lines</b> 16 G Lt Hand IV 20 G Lt Radial Artery Triple Lumen in IJV <b>Induction</b> O <sub>2</sub> + Thio + Fenta + Mida +	ECG, SPO <sub>2</sub> , ETCO <sub>2</sub> , ABP, FIO <sub>2</sub> , Resp, AWP, CVP, Temp, Urine O/P, Haemochron	Dr Shrinivas Dr Bhupesh

						Morph + Pavl <b>Fibre Optic Bronchoscopy Intubation</b> 9.0 mm ID Cuffed Portex <b>Maintenance</b> O <sub>2</sub> + N <sub>2</sub> O + Iso + Fenta + Mida + Pavl <b>CPB – 88’ , ACC – 451’</b> <b>Supports</b> Adrenaline Shifted to CSICU For Elective Ventilation	ACT, ABG	
89	16/03/05	Shamsudheen 251259 45 M	LA Myxoma	Myxoma Excision	Dr MM Dr AS Dr SKP	<b>GA + CPB Lines</b> 16 G Lt Hand IV 20 G Lt Radial Artery 14 G Rt Hand IV 18 G Secalon in Femoral Artery Triple Lumen in IJV <b>Induction</b> O <sub>2</sub> + Thio + Fenta + Mida + Morph + Pavl <b>Intubation</b> 9.0 mm ID Cuffed Portex <b>Maintenance</b> O <sub>2</sub> + N <sub>2</sub> O + Iso + Fenta + Mida + Pavl <b>CPB – 103’ , ACC – 69’</b> <b>Supports</b> Adrenaline Shifted to CSICU For Elective Ventilation	ECG, SPO <sub>2</sub> , ETCO <sub>2</sub> , ABP, FIO <sub>2</sub> , Resp, AWP, CVP, Temp, Urine O/P, Haemochron ACT, ABG	Dr Unni Dr Siva
90	17/03/06	Saravanan N 250842	Foreign Body In Left Main Bronchus	Removal	Prof MUK Dr GSN	<b>GA Lines</b>	ECG, SPO <sub>2</sub> , ETCO <sub>2</sub> , ABP,	Prof Rupa Dr Bhupesh

		12 M				16 G Lt Hand IV 20 G Lt Radial Artery <b>Induction</b> O <sub>2</sub> + Sevo + Prop + Fenta + Mida Foreign Body Removed By <b>Rigid Bronchoscopy</b> <b>Maintenance</b> O <sub>2</sub> + Sevo + Fenta + Mida Patient Electively Intubated With 6.5 mm ID Cuffed Portex By Giving Scoline Shifted to CSICU For Elective Ventilation	FIO <sub>2</sub> , Resp, AWP, CVP, Temp, Urine O/P, ACT, ABG	
91	20/03/06	Karuthapandi 246183 22 M	RSOV Aneurysm + CAD, DVD	Patch Closure + CABG	Prof JK Dr MM Dr AS	<b>GA + CPB</b> <b>Lines</b> 16 G Lt Hand IV 20 G Lt Radial Artery 14 G Rt Hand IV 18 G Secalon in Femoral Artery Triple Lumen in IJV <b>Induction</b> O <sub>2</sub> + Thio + Fenta + Mida + Morph + Pavl <b>Intubation</b> 9.0 mm ID Cuffed Portex <b>Maintenance</b> O <sub>2</sub> + N <sub>2</sub> O + Iso + Fenta + Mida + Pavl <b>CPB - 109', ACC - 65'</b> <b>Supports</b> Adrenaline Dobutamine	ECG, SPO <sub>2</sub> , ETCO <sub>2</sub> , ABP, FIO <sub>2</sub> , Resp, AWP, CVP, Temp, Urine O/P, Haemochron ACT, ABG	Dr Shrinivas Dr Bhupesh

						Shifted to CSICU For Elective Ventilation		
92	21/03/06	Thankappan P 251228 70 M	F – P Block	Rt F – P Graft	Prof MUK Dr GSN	<b>GA</b> <b>Lines</b> 16 G Lt Hand IV 20 G Lt Radial Artery 14 G Rt Hand IV Triple Lumen in IJV <b>Induction</b> O <sub>2</sub> + Thio + Fenta + Mida + Morph + Pavl <b>Intubation</b> 9.0 mm ID Cuffed Portex <b>Maintenance</b> O <sub>2</sub> + N <sub>2</sub> O + Iso + Fenta + Mida + Pavl <b>Epidural Analgesia</b> Sensorcaine + Fenta Shifted to CSICU For Elective Ventilation	ECG, SPO <sub>2</sub> , ETCO <sub>2</sub> , ABP, FIO <sub>2</sub> , Resp, AWP, CVP, Temp, Urine O/P, ACT, ABG	Prof Rupa Dr Bhupesh
93	23/03/06	Vijayakumaran 242023 45 M	Sev MR , Sev PAH	MV Repair	Prof RSK Dr AS	<b>GA + CPB</b> <b>Lines</b> 16 G Lt Hand IV 20 G Lt Radial Artery 14 G Rt Hand IV 16 – 18 Cavafix ( 72 cm) in Femoral Vein Triple Lumen in IJV <b>Induction</b> O <sub>2</sub> + Thio + Fenta + Mida + Morph + Pavl <b>Intubation</b> 9.0 mm ID Cuffed Portex <b>Maintenance</b> O <sub>2</sub> + N <sub>2</sub> O + Iso + Fenta +	ECG, SPO <sub>2</sub> , ETCO <sub>2</sub> , ABP, FIO <sub>2</sub> , Resp, AWP, CVP, Temp, Urine O/P, Haemochron ACT, ABG	Dr Sinha Dr Siva

						Mida + Pavl CPB – 134', ACC – 83' <b>Supports</b> Adrenaline Dobutamine Shifted to CSICU For Elective Ventilation		
94	24/03/06	Mariya Dsilva 9005805 50 M	Post Rt Upper and Middle Lobectomy , Bronchiectasis + Sev Bronchial Asthma	Lingulectomy	Prof MUK Dr GSN	<b>GA</b> <b>Lines</b> 16 G Lt Hand IV 20 G Lt Radial Artery Triple Lumen in IJV <b>Induction</b> O <sub>2</sub> + Thio + Fenta + Mida + Pavl <b>Intubation</b> 37 Fr Rt Endobronchial Tube <b>Fibre Optic Bronchoscopy</b> <b>Done.</b> <b>Maintenance</b> O <sub>2</sub> + N <sub>2</sub> O + Iso + Fenta + Mida + Pavl <b>Epidural Analgesia</b> Sensorcaine + Fenta Shifted to CSICU For Elective Ventilation	ECG, SPO <sub>2</sub> , ETCO <sub>2</sub> , ABP, FIO <sub>2</sub> , Resp, AWP, CVP, Temp, Urine O/P, ABG	Dr Sinha Dr Bhupesh
95	27/03/06	Prassanna R 243694 43 F	B/L Aorto liliac Block	Aorto – Renal Endartectomy + AF Graft	Prof MUK Dr GSN	<b>GA</b> <b>Lines</b> 16 G Lt Hand IV 20 G Lt Radial Artery 14 G Rt Hand IV Triple Lumen in IJV <b>Induction</b> O <sub>2</sub> + Thio + Fenta + Mida + Morph + Pavl	ECG, SPO <sub>2</sub> , ETCO <sub>2</sub> , ABP, FIO <sub>2</sub> , Resp, AWP, CVP, Temp, Urine O/P, ABG	Dr Gayathi Dr Bhupesh

						<b>Intubation</b> 7.5 mm ID Cuffed Portex <b>Maintenance</b> O <sub>2</sub> + N <sub>2</sub> O + Iso + Fenta + Mida + Pavl <b>Epidural Analgesia</b> Sensorcaine + Fenta Shifted to CSICU For Elective Ventilation		
96	31/03/06	Padmajan C 243705 42 M	Sev MR , Mod AR , TR , Sev PAH	DVR	Dr MM Dr AS	<b>GA + CPB Lines</b> 16 G Lt Hand IV 20 G Lt Radial Artery 14 G Rt Hand IV 16 – 18 Cavafix ( 72 cm) in Femoral Vein Triple Lumen in IJV <b>Induction</b> O <sub>2</sub> + Thio + Fenta + Mida + Morph + Pavl <b>Intubation</b> 9.0 mm ID Cuffed Portex <b>Maintenance</b> O <sub>2</sub> + N <sub>2</sub> O + Iso + Fenta + Mida + Pavl <b>CPB – 180' , ACC – 130'</b> <b>Supports</b> Adrenaline Dobutamine Shifted to CSICU For Elective Ventilation	ECG, SPO <sub>2</sub> , ETCO <sub>2</sub> , ABP, FIO <sub>2</sub> , Resp, AWP, CVP, Temp, Urine O/P, Haemochron ACT, ABG	Dr Unni Dr Siva
97	03/03/06	Sameera Adam 9709231 56 F	Lt VL Tumor	Lt Thoracotomy and Upper Lobectomy	Prof MUK Dr NB	<b>GA Lines</b> 16 G Lt Hand IV 20 G Lt Radial Artery	ECG, SPO <sub>2</sub> , ETCO <sub>2</sub> , ABP, FIO <sub>2</sub> , Resp, AWP, CVP,	Dr Unni Dr Bhupesh

						<p>Triple Lumen in IJV</p> <p><b>Induction</b> O<sub>2</sub> + Thio + Fenta + Mida + Pavl</p> <p><b>Intubation</b> 32 Fr Rt Endobronchial Tube</p> <p><b>Fibre Optic Bronchoscopy Done.</b></p> <p><b>Maintenance</b> O<sub>2</sub> + N<sub>2</sub>O + Iso + Fenta + Mida + Pavl</p> <p><b>Epidural Analgesia</b> Sensorcaine + Fenta</p> <p>Shifted to CSICU For Elective Ventilation</p>	Temp, Urine O/P, ABG	
98	04/04/06	Resmi Davis 242328 34 F	Sev AR , Sev MR , AS , Sev PAH	DVR	Dr MM Dr RR	<p><b>GA + CPB</b></p> <p><b>Lines</b> 16 G Lt Hand IV 20 G Lt Radial Artery 14 G Rt Hand IV Triple Lumen in IJV</p> <p><b>Induction</b> O<sub>2</sub> + Thio + Fenta + Mida + Morph + Pavl</p> <p><b>Intubation</b> 7.5 mm ID Cuffed Portex</p> <p><b>Maintenance</b> O<sub>2</sub> + N<sub>2</sub>O + Iso + Fenta + Mida + Pavl</p> <p><b>CPB – 160’ , ACC – 117’</b></p> <p><b>Supports</b> Adrenaline</p> <p>Shifted to CSICU For Elective Ventilation</p>	ECG, SPO <sub>2</sub> , ETCO <sub>2</sub> , ABP, FIO <sub>2</sub> , Resp, AWP, CVP, Temp, Urine O/P, Haemochron ACT, ABG	Dr Unni Dr Subru
99	10/04/06	Sebastian W	Sev MS / MR , Sev	MVR + TV	Dr MM	<b>GA + CPB</b>	ECG, SPO <sub>2</sub> ,	Dr Pradeep

		9607598 25 M	PAH , Sev TR	Plasty	Dr RR	<p><b>Lines</b> 16 G Lt Hand IV 20 G Lt Radial Artery 14 G Rt Hand IV 18 G Secalon in Lt Femoral Artery Triple Lumen in IJV</p> <p><b>Induction</b> O<sub>2</sub> + Thio + Fenta + Mida + Morph + Pavl</p> <p><b>Intubation</b> 8.5 mm ID Cuffed Portex</p> <p><b>Maintenance</b> O<sub>2</sub> + N<sub>2</sub>O + Iso + Fenta + Mida + Pavl</p> <p>CPB – 164’ , ACC – 110’</p> <p><b>Supports</b> Adrenaline Dobutamine Shifted to CSICU For Elective Ventilation</p>	ETCO <sub>2</sub> , ABP, FIO <sub>2</sub> , Resp, AWP, CVP, Temp, Urine O/P, Haemochron ACT, ABG	Dr Ganesh
100	15/04/06	Narayanan P 252244 62 M	Popilitial Artery Aneurysm	Excision and Bypass	Prof MUK Dr NB	<p><b>GA</b></p> <p><b>Lines</b> 16 G Lt Hand IV 20 G Lt Radial Artery Triple Lumen in IJV</p> <p><b>Induction</b> O<sub>2</sub> + Thio + Fenta + Mida + Morph + Pavl</p> <p><b>Intubation</b> 8.5 mm ID Cuffed Portex</p> <p><b>Maintenance</b> O<sub>2</sub> + N<sub>2</sub>O + Iso + Fenta + Mida + Pavl</p> <p>Shifted to CSICU For</p>	ECG, SPO <sub>2</sub> , ETCO <sub>2</sub> , ABP, FIO <sub>2</sub> , Resp, AWP, CVP, Temp, Urine O/P, Haemochron ACT, ABG	Prof Rupa Dr Subru

101	22/04/06	Padmakshy 225552 42 F	Mod MR , MS , Mod AR , Sev TR	DVR + Tricuspid Repair	Dr MM Dr RR Dr PYM	Elective Ventilation <b>GA + CPB</b> <b>Lines</b> 16 G Lt Hand IV 20 G Lt Radial Artery 14 G Rt Hand IV 18 G Secalon in Lt Femoral Artery Triple Lumen in IJV <b>Induction</b> O <sub>2</sub> + Thio + Fenta + Mida + Morph + Pavl <b>Intubation</b> 7.5 mm ID Cuffed Portex <b>Maintenance</b> O <sub>2</sub> + N <sub>2</sub> O + Iso + Fenta + Mida + Pavl <b>CPB - 161' , ACC - 114'</b> <b>Supports</b> Adrenaline Dobutamine Shifted to CSICU For Elective Ventilation	ECG, SPO <sub>2</sub> , ETCO <sub>2</sub> , ABP, FIO <sub>2</sub> , Resp, AWP, CVP, Temp, Urine O/P, Haemochron ACT, ABG	Dr Shrinivas Dr Bhupesh
102	26/04/06	Lakhan Lal 252354 52 M	Carotid Body Tumour	Excision	Prof MUK Dr NB	<b>GA</b> <b>Lines</b> 16 G Lt Hand IV 20 G Lt Radial Artery 14 G Rt Hand IV <b>Induction</b> O <sub>2</sub> + Thio + Fenta + Mida + Morph + Pavl <b>Intubation</b> 8.5 mm ID Cuffed Portex <b>Maintenance</b> O <sub>2</sub> + N <sub>2</sub> O + Iso + Fenta +	ECG, SPO <sub>2</sub> , ETCO <sub>2</sub> , ABP, FIO <sub>2</sub> , Resp, AWP, CVP, Temp, Urine O/P, ABG	Dr Gayathi Dr Bhupesh

						Mida + Pavl Shifted to CSICU For Elective Ventilation		
103	29/04/06	Zainaba 248999 45 F *	Posterior Mediastenal Neurofibroma Thoracic Paraspinal	Excision and Laminectomy	Prof MUK Dr NB Dr Eswar	<b>GA</b> <b>Lines</b> 16 G Lt Hand IV 20 G Lt Radial Artery Triple Lumen in IJV <b>Induction</b> O <sub>2</sub> + Thio + Fenta + Mida + Pavl <b>Intubation</b> 32 Fr Rt Endobronchial Tube <b>Fibre Optic Bronchoscopy</b> <b>Done.</b> <b>Maintenance</b> O <sub>2</sub> + N <sub>2</sub> O + Iso + Fenta + Mida + Pavl <b>Epidural Analgesia</b> Sensorcaine + Fenta Shifted to CSICU For Elective Ventilation	ECG, SPO <sub>2</sub> , ETCO <sub>2</sub> , ABP, FIO <sub>2</sub> , Resp, AWP, CVP, Temp, Urine O/P, ABG	Prof Rupa Dr Bhupesh

SL NO	DATE	PATIENT DETAILS	DIAGNOSIS	PROCEDURE	SURGEON	ANAESTHESIA TECHNIQUE	MONITORING	ANAESTHETIST
01	01/ 09 / 05	Harish chandra 145013 22M	Rt Frontal Glioma	Rt Frontal Craniotomy and Clipping	Dr Mathew Dr Nilesh	GA <b>Lines</b> 16G Lt Hand IV 20G Rt Radial Artery 16 – 18 Cavafix <b>Induction</b> : Fenta+ Pavl+ Thio+ Xylo <b>Intubation</b> 8. 5mm ID Reinforced PVC ETT <b>Maintenance</b> ; O <sub>2</sub> + N <sub>2</sub> O + Iso+ Fenta +Pavl <b>Reversed + Extubated</b> and Shifted to NSICU For Monitoring	Pulse, Resp , ECG , ABP , ABG , IMCO2 , AWP , PNS , Urine O/P	Prof Rathod Dr Deepa
02	01/09/05	Manilal v 144835 36 M	Chiari I Malformation	FMD	Dr Muthu Dr Raghavan	GA <b>Lines</b> 16G Lt Hand IV 20G Rt Radial Artery 16 – 18 Cavafix <b>Induction</b> ; Fenta+ Pavl+ Thio+ Xylo <b>Intubation</b> 8. 5mm ID Reinforced PVC ETT <b>Maintenance</b> ; O <sub>2</sub> + N <sub>2</sub> O + Iso+ Fenta +Pavl <b>Reversed + Extubated</b> and Shifted to NSICU For Monitoring	Pulse, Resp , ECG , ABP , ABG , IMCO2 , AWP , PNS , Urine O/P	Dr Sinha Dr Sathyaject
03	02/09/05	Thankam v k	Lt MCA Bifurcation	Aneurysm clipping	Prof RNB	GA	Pulse, Resp ,	Dr Suneel

		144881 50 F	Aneurysm		Dr Mukund	Lines 16G Lt Hand IV 20G Lt Radial Artery Tripple Lumen in IJV <b>Induction</b> ; Fenta+ Pavl+ Thio+ Xylo Intubation 7 . 5MM ID Rienforced PVC ETT <b>Maintenance</b> ; O <sub>2</sub> + N <sub>2</sub> O + Iso+ Fenta +Pavl <b>Reversed + Extubated</b> and Shifted to NSICU For Monitoring	ECG , ABP , CVP , ABG , IMCO <sub>2</sub> , AWP , PNS , Urine O/P	Dr Satyajeet
04	02/09/05	Navaneeth p p 206193 19 M	Lt Mesial Temporal Ganglio Glioma	Lt ATL and Lesionectomy	Dr Mathew Dr Amithabh	GA <b>Lines</b> 16G Lt Hand IV 20G Rt Radial Artery 16 – 18 Cavafix <b>Induction</b> ; Fenta+ Pavl+ Thio+ Xylo <b>Intubation</b> 8. 5mm ID Reinforced PVC ETT <b>Maintenance</b> ; O <sub>2</sub> + N <sub>2</sub> O + Iso+ Fenta +Pavl <b>Reversed + Extubated</b> and Shifted to NSICU For Monitoring	Pulse, Resp , ECG , ABP , ABG , IMCO <sub>2</sub> , AWP , PNS , Urine O/P	Prof Rathod Dr S Rao
05	05/09/05	Sumasoman 9608131 18 F	Congenital Hydrocephalus and Aqueductal Stenosis	ETV	Prof RNB Dr Raghavan	GA <b>Lines</b> 16G Lt Hand IV <b>Induction</b> ; Fenta+	Pulse, Resp , ECG , IMCO <sub>2</sub> , AWP , PNS , Urine O/P	Prof Rathod Dr Smitha

						Pavl+ Thio+ Xylo <b>Intubation</b> 7.5MM ID Cuffed Portex <b>Maintenance</b> ; O <sub>2</sub> + N <sub>2</sub> O + Iso+ Fenta +Pavl <b>Reversed + Extubated</b> and Shifted to NSICU For Monitoring		
06	08/09/05	Noel N D 244393 21 M	Post Third Ventricular Cyst	ETV	Prof RNB Dr Raghavan	GA <b>Lines</b> 16G Lt Hand IV <b>Induction</b> ; Fenta+ Pavl+ Thio+ Xylo <b>Intubation</b> 8. 5MM ID Cuffed Portex <b>Maintenance</b> ; O <sub>2</sub> + N <sub>2</sub> O + Iso+ Fenta +Pavl <b>Reversed + Extubated</b> and Shifted to NSICU For Monitoring	Pulse, Resp , ECG , IMCO <sub>2</sub> , AWP , PNS , Urine O/P	Dr Unni
06	08/09/05	Ramalekshmi V 244329 40 F	Rt Thalamic Glioma	Rt Pericoronal Parasagittal Craniotomy and Decompression	Prof RNB Dr BJR	GA <b>Lines</b> 16G Lt Hand IV 20G Rt Radial Artery 16 – 18 Cavafix <b>Induction</b> ; Fenta+ Pavl+ Thio+ Xylo <b>Intubation</b> 7 . 5MM ID Cuffed Portex <b>Maintenance</b> ; O <sub>2</sub> + N <sub>2</sub> O + Iso+ Fenta +Pavl <b>Reversed + Extubated</b>	Pulse, Resp , ECG , ABP , ABG , IMCO <sub>2</sub> , AWP , PNS , Urine O/P	Dr Unni

						and Shifted to NSICU For Monitoring		
07	12/09/05	Mariyaselvam 244386 48 F	Lt MCA Aneurysm	Lt Pterional Craniotomy and Clipping	Prof RNB Dr Muthu	GA <b>Lines</b> 16G Lt Hand IV 20G Lt Radial Artery Tripple Lumen in IJV <b>Induction</b> ; Fenta+ Pavl+ Thio+ Xylo <b>Intubation</b> 7 . 5MM ID Rienforced PVC ETT <b>Maintenance</b> ; O <sub>2</sub> + N <sub>2</sub> O + Iso+ Fenta +Pavl <b>Reversed + Extubated</b> and Shifted to NSICU For Monitoring	Pulse, Resp , ECG , ABP , CVP , ABG , IMCO <sub>2</sub> , AWP , PNS ,Urine O/P	Dr Sinha Dr S Rao
08	16/09/05	Nainarammal 214127 27 F	Extradural Cervical Cord Cyst	Laminectomy and Decompression	Dr BJR Dr Nilesh	GA <b>Lines</b> 16G Lt Hand IV 20G Rt Radial Artery 16 – 18 Cavafix <b>Induction</b> ; Fenta+ Pavl+ Thio+ Xylo <b>Intubation</b> 7 . 5MM ID Cuffed Portex <b>Maintenance</b> ; O <sub>2</sub> + N <sub>2</sub> O + Iso+ Fenta +Pavl <b>Reversed + Extubated</b> and Shifted to NSICU For Monitoring	Pulse, Resp , ECG , ABP , ABG , IMCO <sub>2</sub> , AWP , PNS , Urine O/P	Dr Sinha Dr Satyajeet
09	19/09/05	Vekitesha P 244576	Rt Insular Glioma	Rt Frontotemporal Craniotomy and	Dr GM Dr	GA <b>Lines</b>	Pulse, Resp , ECG , ABP ,	Dr Sinha Dr Smita

		34 M		Decompression	Raghavan	16G Lt Hand IV 20G Rt Radial Artery 16 – 18 Cavafix <b>Induction ;</b> Fenta+ Pavl+ Thio+ Xylo <b>Intubation</b> 9.0MM ID Cuffed Portex <b>Maintenance ;</b> O <sub>2</sub> + N <sub>2</sub> O + Iso+ Fenta +Pavl <b>Reversed + Extubated</b> and Shifted to NSICU For Monitoring	ABG , IMCO2 , AWP , PNS , Urine O/P	
10	20/09/05	Jilna Jose 244912 12 F	Postr Fossa Lesion Obstructive Hydrocephalus	ETV	Prof RNB Dr Nilesh	GA <b>Lines</b> 16G Lt Hand IV <b>Induction ;</b> Fenta+ Pavl+ Thio+ Xylo <b>Intubation</b> 6 .5MM ID Cuffed Portex <b>Maintenance ;</b> O <sub>2</sub> + N <sub>2</sub> O + Iso+ Fenta +Pavl <b>Reversed + Extubated</b> and Shifted to NSICU For Monitoring	Pulse, Resp , ECG , NIBP, IMCO2 , AWP , PNS , Urine O/P	Prof Rathod Dr Smita
11	23/09/05	Rekhadevi 244354 38 F	Craniopharygioma	Rt Frontotemporal Craniotomy and Excision	Prof RNB Dr Eswar	GA <b>Lines</b> 16G Lt Hand IV 20G Rt Radial Artery 16 – 18 Cavafix <b>Induction ;</b> Fenta+ Pavl+ Thio+ Xylo <b>Intubation</b> 8. 5mm ID Reinforced	Pulse, Resp , ECG , ABP , ABG , IMCO2 , AWP , PNS , Urine O/P	Dr Sinha Dr Smita

						PVC ETT <b>Maintenance</b> ; O <sub>2</sub> + N <sub>2</sub> O + Iso+ Fenta +Pavl <b>Reversed + Extubated</b> and Shifted to NSICU For Monitoring		
12	24/09/05	Vijya S 243935 30 F	Hydrocephalus O/P Case Of Suprasellar Meningioma	Lt VP Shunt	Dr Eswar Dr Rajiv	GA <b>Lines</b> 16G Lt Hand IV <b>Induction</b> : Fenta+ Pavl+ Thio+ Xylo <b>Intubation</b> 7 .5MM ID Cuffed Portex <b>Maintenance</b> ; O <sub>2</sub> + N <sub>2</sub> O + Iso+ Fenta +Pavl <b>Reversed + Extubated</b> and Shifted to NSICU For Monitoring	Pulse, Resp , ECG , NIBP, IMCO <sub>2</sub> , AWP , PNS , Urine O/P	Dr Sinha Dr Smita
13	26/09/05	Guddi Israt 244383 18 F	Olfactory Groove Meningioma	Craniotomy and Excision	Prof RNB Dr Mukund	GA <b>Lines</b> 16G Lt Hand IV 20G Rt Radial Artery 16 – 18 Cavafix <b>Induction</b> ; Fenta+ Pavl+ Thio+ Xylo <b>Intubation</b> 7. 5mm ID Reinforced PVC ETT <b>Maintenance</b> ; O <sub>2</sub> + N <sub>2</sub> O + Iso+ Fenta +Pavl <b>Reversed + Extubated</b> and Shifted to NSICU For Monitoring	Pulse, Resp , ECG , ABP , ABG , IMCO <sub>2</sub> , AWP , PNS , Urine O/P	Dr Suneel Dr Satyaject
14	26/09/05	Fasila M K	P/O AAD	Reexploration	Dr BJR	GA	Pulse, Resp ,	Dr Sinha

		240280 39 F		Contour Rod Brook's Fusion	Dr Nilesh	<b>Lines</b> 16G Lt Hand IV 20G Rt Radial Artery 16 – 18 Cavafix <b>Induction</b> : Fenta+ Pavl+ Thio+ Xylo <b>Intubation</b> 7. 5mm ID Reinforced PVC ETT <b>Maintenance</b> ; O <sub>2</sub> + N <sub>2</sub> O + Iso+ Fenta +Pavl <b>Reversed + Extubated</b> and Shifted to NSICU For Monitoring	ECG , ABP , ABG , IMCO2 , AWP , PNS , Urine O/P	Dr Smita
15	27/09/05	Sheeba K 244050 23 F	Rt Vestibular Schwannoma	Retromastoid Craniotomy and Decompression	Dr Suresh Dr Muthu	GA <b>Lines</b> 16G Lt Hand IV 20G Lt Radial Artery 16 – 18 Cavafix Tripple Lumen in IJV <b>Induction</b> : Fenta+ Pavl+ Thio+ Xylo <b>Intubation</b> 7. 5mm ID Reinforced PVC ETT <b>Maintenance</b> ; O <sub>2</sub> + N <sub>2</sub> O + Iso+ Fenta +Pavl <b>Reversed + Extubated</b> and Shifted to NSICU For Monitoring	Pulse, Resp , ECG , ABP , CVP, ABG , IMCO2 , AWP , PNS , Urine O/P	Dr Suneel
16	30/09/05	Alagammai G 244337 45 F	Lt Parietal AVM	Lt Parietal Craniotomy and Excision	Prof RNB Dr Harshad	GA <b>Lines</b> 16G Lt Hand IV 20G Lt Radial Artery Tripple Lumen in IJV	Pulse, Resp , ECG , ABP , CVP, ABG , IMCO2 , AWP , PNS , Urine	Dr Suneel Dr Smita

						<p><b>Induction</b> : Fenta+ Pavl+ Thio+ Xylo</p> <p><b>Intubation</b> 7. 5mm ID Reinforced PVC ETT</p> <p><b>Maintenance</b> ; O<sub>2</sub> + N<sub>2</sub>O + Iso+ Fenta +Pavl</p> <p><b>Reversed + Extubated</b> and Shifted to NSICU For Monitoring</p>	O/P	
17	01/02/06	Leela 249377 67 F	Obstructed Hydrocephalus	ETV	Dr RNB Dr AG	<p>GA</p> <p><b>Lines</b> 16G Lt Hand IV 20G Lt Radial Artery</p> <p><b>Induction</b> : Fenta+ Pavl+ Thio+ Xylo</p> <p><b>Intubation</b> 7. 5mm ID Reinforced PVC ETT</p> <p><b>Maintenance</b> ; O<sub>2</sub> + N<sub>2</sub>O + Iso+ Fenta +Pavl</p> <p><b>Reversed + Extubated</b> and Shifted to NSICU For Monitoring</p>	Pulse, Resp , ECG , ABP , ABG , IMCO2 , AWP , PNS , Urine O/P	Dr Gayathri Dr Sriganesh
18	01/02/06	Usha T V 218898 50 F	Mesial Temporal Lobe Sclerosis	Craniotomy And Temporal Lobectomy	Dr MR Dr Dileep	<p>GA</p> <p><b>Lines</b> 16G Lt Hand IV 20G Lt Radial Artery 16 – 18 Cavafix</p> <p><b>Induction</b> : Fenta+ Pavl+ Thio+ Xylo</p> <p><b>Intubation</b> 7. 5mm ID Reinforced PVC ETT</p> <p><b>Maintenance</b> ; O<sub>2</sub> +</p>	Pulse, Resp , ECG , ABP , CVP, ABG , IMCO2 , AWP , PNS , Urine O/P	Dr Pradeep Dr Subbu

						N <sub>2</sub> O + Iso+ Fenta +Pavl <b>Reversed + Extubated</b> and Shifted to NSICU For Monitoring		
19	01/02/06	Alameluamma 248721 35 F	Corpus Callosal Glioma	Craniotomy And Excision	Dr HVE Dr AG	GA <b>Lines</b> 16G Lt Hand IV 20G Lt Radial Artery 16 – 18 Cavafix <b>Induction :</b> Fenta+ Pavl+ Thio+ Xylo <b>Intubation</b> 7. 5mm ID Reinforced PVC ETT <b>Maintenance ;</b> O <sub>2</sub> + N <sub>2</sub> O + Iso+ Fenta +Pavl <b>Reversed + Extubated</b> and Shifted to NSICU For Monitoring	Pulse, Resp , ECG , ABP , CVP, ABG , IMCO <sub>2</sub> , AWP , PNS , Urine O/P	Dr Gayatri Dr Sriganesh
20	02/02/06	Abdul 28 M	Obstructed Hydrocephalus	ETV	Prof RNB Dr AG	GA <b>Lines</b> 16G Lt Hand IV <b>Induction :</b> Fenta+ Pavl+ Thio+ Xylo <b>Intubation</b> 8 .5MM ID Cuffed Portex <b>Maintenance ;</b> O <sub>2</sub> + N <sub>2</sub> O + Iso+ Fenta +Pavl <b>Reversed + Extubated</b> and Shifted to NSICU For Monitoring	Pulse, Resp , ECG , NIBP, IMCO <sub>2</sub> , AWP , PNS , Urine O/P	Dr Dash Dr Sivakumar
21	02/02/06	Jayakumar K 248197 53 M	HCF Post OP Artery Aneurysm	TP Shunt	Dr HVE Dr KNM	GA <b>Lines</b> 16G Lt Hand IV	Pulse, Resp , ECG , ABP , ABG , IMCO <sub>2</sub>	Dr Koshy Dr S Rao

						20G Lt Radial Artery 16 – 18 Cavafix <b>Induction</b> : Fenta+ Pavl+ Thio+ Xylo <b>Intubation</b> 8. 5mm ID Reinforced PVC ETT <b>Maintenance</b> ; O <sub>2</sub> + N <sub>2</sub> O + Iso+ Fenta +Pavl <b>Reversed + Extubated</b> and Shifted to NSICU For Monitoring	, AWP , PNS , Urine O/P	
22	02/02/06	Suresh 29 M	Clivial Bony Lesion	Transoral Decompression	Prof RNB Dr AG	GA <b>Lines</b> 16G Lt Hand IV 20G Lt Radial Artery 16 – 18 Cavafix <b>Induction</b> : Fenta+ Pavl+ Thio+ Xylo <b>Intubation</b> 8. 5mm ID Reinforced PVC ETT <b>Maintenance</b> ; O <sub>2</sub> + N <sub>2</sub> O + Iso+ Fenta +Pavl <b>Reversed + Extubated</b> and Shifted to NSICU For Monitoring	Pulse, Resp , ECG , ABP , ABG , IMCO <sub>2</sub> , AWP , PNS , Urine O/P	Dr Dash Dr Sivakumar
23	03/02/06	Kunjamma 245903 62 F	Parkinsons Disease	DBS and Implantation Of Battery	Dr RMR Dr BJR	GA <b>Lines</b> 16G Lt Hand IV <b>Induction</b> : Fenta+ Pavl+ Thio+ Xylo <b>Intubation</b> 7. 5mm ID Reinforced PVC ETT	Pulse, Resp , ECG , NIBP , IMCO <sub>2</sub> , AWP , PNS , Urine O/P	Dr Gayatri Dr Sivakumar

						<b>Maintenance</b> ; O <sub>2</sub> + N <sub>2</sub> O + Iso+ Fenta +Pavl <b>Reversed + Extubated</b> and Shifted to NSICU For Monitoring		
24	04/02/06	Sasidharan 249643 58 M	Rt MCA Bifurcation Aneurysm	F – T craniotomy and decompression.	Prof RNB Dr KNM	GA <b>Lines</b> 16G Lt Hand IV 20G Lt Radial Artery Tripple Lumen in IJV <b>Induction</b> : Fenta+ Pavl+ Thio+ Xylo <b>Intubation</b> 9.0 mm ID Reinforced PVC ETT <b>Maintenance</b> ; O <sub>2</sub> + N <sub>2</sub> O + Iso+ Fenta +Pavl <b>Reversed + Extubated</b> and Shifted to NSICU For Monitoring	Pulse, Resp , ECG , ABP , CVP , ABG , IMCO <sub>2</sub> , AWP , PNS , Urine O/P	Dr Subrat Dr S Rao
25	04/02/06	Yadunand 249624 11 Months	IDEM Lesion	Laminectomy and Excision	Dr BJR Dr Dilcep	GA <b>Lines</b> 22 G Lt Hand IV 22 G Lt Femoral Artery Triple Lumen in Femoral <b>Induction</b> O <sub>2</sub> + Sevo + Fenta + Pavl <b>Intubation</b> 3.5 mm ID Portex <b>Maintenance</b> O <sub>2</sub> + N <sub>2</sub> O + Iso + Fenta + Pavl <b>Reversed + Extubated</b> and Shifted to NSICU	Pulse, Resp , ECG , ABP , CVP , ABG , IMCO <sub>2</sub> , AWP , PNS , Urine O/P	Dr Pradeep Dr Smita

						For Monitoring		
26	05/02/06 Emergency	Alamelu 248721 35 F	Corpus Callosal Glioma	Craniotomy And Excision	Dr HVE Dr Rajiv	GA <b>Lines</b> 16G Lt Hand IV 20G Lt Radial Artery 16 – 18 Cavafix <b>Induction :</b> Fenta+ Pavl+ Thio+ Xylo <b>Intubation</b> 7. 5mm ID Reinforced PVC ETT <b>Maintenance ;</b> O <sub>2</sub> + N <sub>2</sub> O + Iso+ Fenta +Pavl <b>Reversed + Extubated</b> and Shifted to NSICU For Monitoring	Pulse, Resp , ECG , ABP , ABG , IMCO2 , AWP , PNS , Urine O/P	Dr Unni Dr Sudhakar
27	06/02/06	Suma K P 249827 35 F	PIVD	Anterior Cervical Disectomy	Dr HVE Dr Gopal	GA <b>Lines</b> 16G Lt Hand IV 16 G Lt Hand IV 20G Lt Radial Artery <b>Induction :</b> Fenta+ Pavl+ Thio+ Xylo <b>Intubation</b> 7. 5mm ID Reinforced PVC ETT <b>Maintenance ;</b> O <sub>2</sub> + N <sub>2</sub> O + Iso+ Fenta +Pavl <b>Reversed + Extubated</b> and Shifted to NSICU For Monitoring	Pulse, Resp , ECG , ABP , ABG , IMCO2 , AWP , PNS , Urine O/P	Prof Rathod Dr Sriganesh
28	06/02/06	Sainaba 249399 50 F	Moya Moya Disease	Left ST- MIA Byepass	Dr BJR Dr AG	GA <b>Lines</b> 16G Lt Hand IV 20G Lt Radial Artery	Pulse, Resp , ECG , ABP , ABG , IMCO2 , AWP , PNS ,	Dr Pradeep Dr Smita

						16 – 18 Cavafix <b>Induction</b> : Fenta+ Pavl+ Thio+ Xylo <b>Intubation</b> 7. 5mm ID Reinforced PVC ETT <b>Maintenance</b> ; O <sub>2</sub> + N <sub>2</sub> O + Iso+ Fenta +Pavl <b>Reversed + Extubated</b> and Shifted to NSICU For Monitoring	Urine O/P	
29	06/02/06	Rasheed K 248221 48 M	Cerebellar Metastages	Suboccipital Craniotomy and Excision	Prof RNB Dr KNM	GA <b>Lines</b> 16G Lt Hand IV 20G Lt Radial Artery 16 – 18 Cavafix <b>Induction</b> : Fenta+ Pavl+ Thio+ Xylo <b>Fibre Optic</b> <b>Bronchoscopic</b> <b>Intubation</b> 9.0 mm ID Reinforced PVC ETT <b>Maintenance</b> ; O <sub>2</sub> + N <sub>2</sub> O + Iso+ Fenta +Pavl <b>Reversed + Extubated</b> and Shifted to NSICU For Monitoring	Pulse, Resp , ECG , ABP , ABG , IMCO <sub>2</sub> , AWP , PNS , Urine O/P	Dr Gayathri Dr S Rao
30	07/02/06	Hasina 249357 40 F	Lt Temporal AVM	Lt Frontal Craniotomy and Clipping	Prof RNB Dr KNM	GA <b>Lines</b> 16G Lt Hand IV 20G Lt Radial Artery Tripple Lumen in IJV <b>Induction</b> : Fenta+ Pavl+ Thio+ Xylo	Pulse, Resp , ECG , ABP , ABG , IMCO <sub>2</sub> , AWP , PNS , Urine O/P	Prof Rathod Dr Sriganesh

						<p><b>Intubation</b> 7.5 mm ID Reinforced PVC ETT</p> <p><b>Maintenance</b> ; O<sub>2</sub> + N<sub>2</sub>O + Iso+ Fenta +Pavl</p> <p><b>Reversed + Extubated</b> and Shifted to NSICU For Monitoring</p>		
31	07/02/06	Smitha 249309 32 F	Insular Glioma	Craniotomy and Decompression	Dr GM Dr AK	<p>GA</p> <p><b>Lines</b> 16G Lt Hand IV 16 G Rt Hand IV 14 G IV Lt Lower Limb 20G Lt Radial Artery 16 – 18 Cavafix</p> <p><b>Induction</b> ; Fenta+ Pavl+ Thio+ Xylo</p> <p><b>Intubation</b> 7.5mm ID Reinforced PVC ETT</p> <p><b>Maintenance</b> ; O<sub>2</sub> + N<sub>2</sub>O + Iso+ Fenta +Pavl</p> <p><b>Reversed + Extubated</b> and Shifted to NSICU For Monitoring</p>	Pulse, Resp , ECG , ABP , ABG , IMCO2 , AWP , PNS , Urine O/P	Dr Dash Dr S Rao
32	07/2/06	Albin 24 M	Convexity Meningioma	Craniotomy and Decompression	Dr Mathew Dr MC	<p>GA</p> <p><b>Lines</b> 16G Lt Hand IV 20G Lt Radial Artery 16 – 18 Cavafix</p> <p><b>Induction</b> ; Fenta+ Pavl+ Thio+ Xylo</p> <p><b>Fibre Optic Bronchoscopic Intubation</b></p>	Pulse, Resp , ECG , ABP , ABG , IMCO2 , AWP , PNS , Urine O/P	Prof Rathod Dr Subru

						9.0 mm ID Reinforced PVC ETT <b>Maintenance</b> ; O <sub>2</sub> + N <sub>2</sub> O + Iso+ Fenta +Pavl <b>Reversed + Extubated</b> and Shifted to NSICU For Monitoring		
33	08/02/06	Leela V K 244750 55 F	Pituitary Tumour	Transsphenoidal Decompression	Dr GM Dr Manmeet	GA <b>Lines</b> 16G Lt Hand IV 20G Lt Radial Artery 14 – 16 Cavafix <b>Induction</b> ; Fenta+ Morph + Pavl+ Thio+ Xylo <b>Intubation</b> 7. 5mm ID Reinforced PVC ETT <b>Maintenance</b> ; O <sub>2</sub> + N <sub>2</sub> O + Iso+ Fenta +Pavl <b>Reversed + Extubated</b> and Shifted to NSICU For Monitoring	Pulse, Resp , ECG , ABP , ABG , IMCO2 , AWP , PNS , Urine O/P	Dr Dash Dr Sivakumar
34	08/02/06	Arati Basak 249717 61 F	Rt ICA Gaint Aneurysm	Craniotomy and Clipping	Prof RNB Dr KNM	GA <b>Lines</b> 16G Lt Hand IV 20G Lt Radial Artery Tripple Lumen in IJV <b>Induction</b> ; Fenta+ Pavl+ Thio+ Xylo <b>Fibre Optic Bronchoscopic Intubation</b> 7.5 mm ID Reinforced PVC ETT	Pulse, Resp , ECG , ABP , CVP , ABG , IMCO2 , AWP , PNS , Urine O/P	Dr Gayatri Dr S Rao

						<p><b>Maintenance</b> ; O<sub>2</sub> + N<sub>2</sub>O + Iso+ Fenta +Pavl  <b>Reversed + Extubated</b>                  and Shifted to NSICU                  For Monitoring</p>		
35	10/02/06	Laila A 187713 48 F	Pituitary Adenoma	Transshenoidal Endoscopic Decompression	Dr GM Dr Gulzar	<p>GA  <b>Lines</b>                      16G Lt Hand IV                      20G Lt Radial Artery                      14 G Rt Hand IV  <b>Induction</b> ; Fenta+                      Pavl+ Thio+ Xylo  <b>Fibre Optic                      Bronchoscopic                      Intubation</b>                      7.5 mm ID Reinforced                      PVC ETT  <b>Maintenance</b> ; O<sub>2</sub> +                      N<sub>2</sub>O + Iso+ Fenta +Pavl  <b>Reversed + Extubated</b>                      and Shifted to NSICU                      For Monitoring</p>	Pulse, Resp , ECG , ABP , CVP , ABG , IMCO2 , AWP , PNS , Urine O/P	Dr Gayari Dr S Rao
36	10/02/06	Abu Baker 249902 34 M	Fourth Ventricular Glioma	Sub Occipital Craniotomy and Excision	Prof RNB Dr KNM	<p>GA  <b>Lines</b>                      16G Lt Hand IV                      20G Lt Radial Artery                      Tripple Lumen in IJV  <b>Induction</b> ; Fenta+                      Pavl+ Thio+ Xylo  <b>Intubation</b>                      8.5 mm ID Reinforced                      PVC ETT  <b>Maintenance</b> ; O<sub>2</sub> +                      N<sub>2</sub>O + Iso+ Fenta +Pavl  <b>Reversed + Extubated</b></p>	Pulse, Resp , ECG , ABP , CVP , ABG , IMCO2 , AWP , PNS , Urine O/P	Dr Dash Dr Sriganesh

						and Shifted to NSICU For Monitoring		
37	11/02/06	Kaliannan 250044 51 M	A- COM Artery Aneurysm	Pterional Craniotomy and Clipping	Prof RNB Dr KNM	GA <b>Lines</b> 16G Lt Hand IV 14 G Rt Hand IV 20G Lt Radial Artery Tripple Lumen in IJV <b>Induction :</b> Fenta+ Pavl+ Thio+ Xylo <b>Fibre Optic Bronchoscopic Intubation</b> 9.0 mm ID Reinforced PVC ETT <b>Maintenance ;</b> O <sub>2</sub> + N <sub>2</sub> O + Iso+ Fenta +Pavl <b>Reversed + Extubated</b> and Shifted to NSICU For Monitoring	Pulse, Resp , ECG , ABP , CVP , ABG , IMCO2 , AWP , PNS , Urine O/P	Dr Koshy Dr S Rao
38	13/02/06	Abraham K K 250110 50 M	Rt MCA Bifurcation Aneurysm	Rt Pterional Craniotomy and Clipping	Prof RNB Dr KNM	GA <b>Lines</b> 16G Lt Hand IV 14 G Rt Hand IV 20G Lt Radial Artery Tripple Lumen in IJV <b>Induction :</b> Fenta+ Pavl+ Thio+ Xylo <b>Intubation</b> 9.0 mm ID Reinforced PVC ETT <b>Maintenance ;</b> O <sub>2</sub> + N <sub>2</sub> O + Iso+ Fenta +Pavl <b>Reversed + Extubated</b> and Shifted to NSICU	Pulse, Resp , Entropy , ECG , ABP , CVP , ABG , IMCO2 , AWP , PNS , Urine O/P	Dr Subrat Dr Sriganesh

39	14/02/06	Shameer K I 244727 18 M	Rt Frontal Glioma	Rt Frontal Craniotomy and Decompression	Dr Mathew Dr AK	For Monitoring GA <b>Lines</b> 16G Lt Hand IV 20G Lt Radial Artery 14 – 16 Cavafix <b>Induction</b> ; Fenta+ Morph + Pavl+ Thio+ Xylo <b>Intubation</b> 8. 5mm ID Reinforced PVC ETT <b>Maintenance</b> ; O <sub>2</sub> + N <sub>2</sub> O + Iso+ Fenta +Pavl <b>Reversed + Extubated</b> and Shifted to NSICU For Monitoring	Pulse, Resp , BIS , ECG , ABP , ABG , IMCO <sub>2</sub> , AWP , PNS , Urine O/P	Dr Koshy Dr Subru
40	14/02/06	Indumathi R 249961 35 F	Rt MCA Bifurcation Aneurysm	Rt Pterional Craniotomy and Clipping	Prof RNB Dr KNM	GA <b>Lines</b> 16G Lt Hand IV 14 G Rt Hand IV 20G Lt Radial Artery Tripple Lumen in IJV <b>Induction</b> ; Fenta + Pavl + Thio+ Xylo <b>Intubation</b> 7.5 mm ID Reinforced PVC ETT <b>Maintenance</b> ; O <sub>2</sub> + N <sub>2</sub> O + Iso+ Fenta +Pavl Shifted to NSICU For Elective Ventilation	Pulse, Resp , ECG , ABP , CVP , ABG , IMCO <sub>2</sub> , AWP , PNS , Urine O/P	Dr Dash Dr Smita
41	14/02/06	Leela Darling 249377 67 F	Lt CP Angle Lesion	Lt Suboccipital Craniotomy and Decompression	Dr RMR Dr Gulzar	GA <b>Lines</b> 16G Lt Hand IV	Pulse, Resp , ECG , ABP , ABG , IMCO <sub>2</sub>	Dr Gayathri Dr S Rao

						20G Lt Radial Artery 14 – 16 Cavafix <b>Induction</b> ; Fenta+ Morph + Pavl+ Thio+ Xylo <b>Intubation</b> 7. 5mm ID Reinforced PVC ETT <b>Maintenance</b> ; O <sub>2</sub> + N <sub>2</sub> O + Iso+ Fenta +Pavl <b>Reversed + Extubated</b> and Shifted to NSICU For Monitoring	, AWP , PNS , Urine O/P	
42	15/02/06	Bharathan P 248511 62 M	Pituitary Adenoma	Transshenoidal Endoscopic Decompression	Dr RMR Dr Gopal	GA <b>Lines</b> 16G Lt Hand IV 14 G Rt Hand IV 20G Lt Radial Artery <b>Induction</b> ; Fenta+ Morph + Pavl+ Thio+ Xylo <b>Fibre Optic Bronchoscopic Intubation</b> 7. 5mm ID Reinforced PVC ETT <b>Maintenance</b> ; O <sub>2</sub> + N <sub>2</sub> O + Iso+ Fenta +Pavl <b>Reversed + Extubated</b> and Shifted to NSICU For Monitoring	Pulse, Resp , BIS , ECG , ABP , ABG , IMCO <sub>2</sub> , AWP , PNS , Urine O/P	Dr Koshy Dr S Rao
43	15/02/06	Syamala 250137 54 F	Para PCOM Aneurysm	Lt Pterional Craniotomy AND clipping	Prof RNB Dr KNM	GA <b>Lines</b> 16G Lt Hand IV 20G Lt Radial Artery	Pulse, Resp , BIS , ECG , ABP , CVP , ABG , IMCO <sub>2</sub>	Dr Gayathri Dr Smita

						<p>Triple Lumen in IJV  <b>Induction</b> ; Fenta+ Pavl+ Thio+ Xylo  <b>Fibre Optic Bronchoscopic Intubation</b>                      7.5 mm ID Reinforced PVC ETT  <b>Maintenance</b> ; O<sub>2</sub> + N<sub>2</sub>O + Iso+ Fenta +Pavl  <b>Reversed + Extubated</b>                      and Shifted to NSICU For Monitoring</p>	, AWP , PNS , Urine O/P	
44	15/02/06	Seturamaya 249680 36 M	Lt Frontotemporal Glioma	Craniotomy and Decompression	Dr Mathew Dr Dileep	<p>GA  <b>Lines</b>                      16 G Lt Hand IV                      14 G Rt Hand IV                      20 G Lt Radial Artery                      16 – 18 Cavafix  <b>Induction</b> ; Fenta+ Morph + Pavl+ Thio+ Xylo  <b>Intubation</b>                      8. 5mm ID Reinforced PVC ETT  <b>Maintenance</b> ; O<sub>2</sub> + N<sub>2</sub>O + Iso+ Fenta +Pavl  <b>Reversed + Extubated</b>                      and Shifted to NSICU For Monitoring</p>	Pulse, Resp , Entropy , ECG , ABP , ABG , IMCO <sub>2</sub> , AWP , PNS , Urine O/P	Dr Pradeep Dr Siva
45	16/02/06	Aravind A 249635 13 M	Lt Thalamic Glioma	Craniotomy and Decompression	Dr BJR Dr Gulzar	<p>GA  <b>Lines</b>                      18 G Lt Hand IV                      20 G Lt Radial Artery                      16 – 18 Cavafix</p>	Pulse, Resp , Entropy , ECG , ABP , ABG , IMCO <sub>2</sub> , AWP , PNS , Urine	Dr Gayathri Dr S Rao

						<p><b>Induction :</b> Fenta+ Morph + Pavl+ Thio+ Xylo</p> <p><b>Intubation</b> 7. 5mm ID Reinforced PVC ETT</p> <p><b>Maintenance ;</b> O<sub>2</sub> + N<sub>2</sub>O + Iso+ Fenta +Pavl</p> <p><b>Reversed + Extubated</b> and Shifted to NSICU For Monitoring</p>	O/P	
46	16/02/06	Ajumon K 9905134 30 M	Lt MTS	Lt ATL	Dr Mathew Dr AK	<p>GA</p> <p><b>Lines</b> 16G Lt Hand IV 20G Lt Radial Artery 14 G Rt Hand IV</p> <p><b>Induction :</b> Fenta+ Morph + Pavl+ Thio+ Xylo</p> <p><b>Intubation</b> 8. 5mm ID Reinforced PVC ETT</p> <p><b>Maintenance ;</b> O<sub>2</sub> + N<sub>2</sub>O + Iso+ Fenta +Pavl</p> <p><b>Reversed + Extubated</b> and Shifted to NSICU For Monitoring</p>	Pulse, Resp , ECG , ABP , ABG , IMCO2 , AWP , PNS , Urine O/P	Dr Dash Dr Smita
47	16/02/06	Sumathi N 40 F	Corpus Callosal Glioma	Bi – Frontal Craniotomy and Decompression	Dr Mukund Dr Manmeet	<p>GA</p> <p><b>Lines</b> 16G Lt Hand IV 20G Lt Radial Artery Triple Lumen in IJV</p> <p><b>Induction :</b> Fenta+ Pavl+ Thio+ Xylo</p> <p><b>Fibre Optic</b></p>	Pulse, Resp , ECG , ABP , CVP , ABG , IMCO2 , AWP , PNS , Urine O/P , BIS	Dr Subrat Dr Subru

						<b>Bronchoscopic Intubation</b> 7.5 mm ID Reinforced PVC ETT <b>Maintenance</b> ; O <sub>2</sub> + N <sub>2</sub> O + Iso+ Fenta +Pavl <b>Reversed + Extubated</b> and Shifted to NSICU For Monitoring		
48	17/02/06	Kamalam M 250291 65 F	Lt Para PCOM Aneurysm	Lt Pterional Craniotomy and Clipping	Dr GM Dr KNM	GA <b>Lines</b> 16G Lt Hand IV 20G Lt Radial Artery Triple Lumen in IJV <b>Induction</b> : Fenta+ Pavl+ Thio+ Xylo <b>Fibre Optic Bronchoscopic Intubation</b> 7.5 mm ID Reinforced PVC ETT <b>Maintenance</b> ; O <sub>2</sub> + N <sub>2</sub> O + Iso+ Fenta +Pavl <b>Reversed + Extubated</b> and Shifted to NSICU For Monitoring	Pulse, Resp , ECG , ABP , Entropy , CVP , ABG , IMCO2 , AWP , PNS , Urine O/P	Dr Koshy Dr S Rao
49	17/02/06	Rossamma K 250042 54 F	Lt Parietal Parasagital Meningioma	Lt Parietal Craniotomy and Excision	Dr HVE Dr AK	GA <b>Lines</b> 16G Lt Hand IV 20G Lt Radial Artery 14 G Rt Hand IV <b>Induction</b> : Fenta+ Morph + Pavl+ Thio+ Xylo <b>Intubation</b>	Pulse, Resp , Entropy , ECG , ABP , ABG , IMCO2 , AWP , PNS , Urine O/P	Dr Gayathri Dr Smita

						7. 5mm ID Reinforced PVC ETT <b>Maintenance</b> ; O <sub>2</sub> + N <sub>2</sub> O + Iso+ Fenta +Pavl <b>Reversed + Extubated</b> and Shifted to NSICU For Monitoring		
50	20/02/06	Tom Alex 210639 10 M	Craniopharyngioma	Lt Pterional Craniotomy and Excision	Dr GM Dr KNM Dr Manmeet	GA <b>Lines</b> 20 G Lt Hand IV 20 G Lt Radial Artery 16 – 18 Cavafix <b>Induction</b> ; Fenta+ Morph + Pavl+ Thio+ Xylo <b>Intubation</b> 6. 5mm ID Reinforced PVC ETT <b>Maintenance</b> ; O <sub>2</sub> + N <sub>2</sub> O + Iso+ Fenta +Pavl <b>Reversed + Extubated</b> and Shifted to NSICU For Monitoring	Pulse, Resp , Entropy , ECG , ABP , ABG , IMCO <sub>2</sub> , AWP , PNS , Urine O/P	Dr Pradeep Dr Sriganesh
51	20/02/06	Podikunju D 249071 49 M	L <sub>4</sub> – L <sub>5</sub> PIVD	Laminectomy and Dissection	Dr HVE Dr Mukund	GA <b>Lines</b> 16G Lt Hand IV 14 G Rt Hand IV <b>Induction</b> ; Fenta+ Morph + Pavl+ Thio+ Xylo <b>Intubation</b> 9 .0 mm ID Reinforced PVC ETT <b>Maintenance</b> ; O <sub>2</sub> + N <sub>2</sub> O + Iso+ Fenta +Pavl	Pulse, Resp , Entropy , ECG , NIBP , IMCO <sub>2</sub> , AWP , PNS , Urine O/P	Dr Gayathri Dr Smita

						<b>Reversed + Extubated</b> and Shifted to NSICU For Monitoring		
52	21/02/06	Thondimoni 249696 45 M	Suprasellar Meningioma	Rt Pterional Craniotomy and Excision	Dr GM Dr KNM	GA <b>Lines</b> 16G Lt Hand IV 20G Lt Radial Artery Triple Lumen in IJV <b>Induction</b> : Fenta+ Pavl+ Thio+ Xylo <b>Fibre Optic</b> <b>Bronchoscopic</b> <b>Intubation</b> 8.5 mm ID Reinforced PVC ETT <b>Maintenance</b> ; O <sub>2</sub> + N <sub>2</sub> O + Iso+ Fenta +Pavl <b>Reversed + Extubated</b> and Shifted to NSICU For Monitoring	Pulse, Resp , ECG , ABP , CVP , ABG , IMCO <sub>2</sub> , AWP , PNS , Urine O/P , BIS	Prof Rathod Dr Smita
53	21/02/06	Pandeswari 248408 32 F	Lt Frontal Glioma	Frontoparietal Craniotomy and Excision	Dr Mathew Dr Dilip	GA <b>Lines</b> 16G Lt Hand IV 20G Lt Radial Artery 14 – 16 Cavafix <b>Induction</b> : Fenta+ Pavl+ Thio+ Xylo <b>Fibre Optic</b> <b>Bronchoscopic</b> <b>Intubation</b> 7.5 mm ID Reinforced PVC ETT <b>Maintenance</b> ; O <sub>2</sub> + N <sub>2</sub> O + Iso+ Fenta +Pavl <b>Reversed + Extubated</b>	Pulse, Resp , ECG , ABP , CVP , ABG , IMCO <sub>2</sub> , AWP , PNS , Urine O/P , BIS	Dr Dash Dr Subru

						and Shifted to NSICU For Monitoring		
54	21/02/06	Padhmanabhan 249004 56 M	Rt CP Angle Tumour	Craniotomy and Decompression	Dr HVE Dr AK	GA <b>Lines</b> 16G Lt Hand IV 20G Lt Radial Artery 14 – 16 Cavafix <b>Induction</b> : Fenta+ Pavl+ Thio+ Xylo <b>Fibre Optic Bronchoscopic Intubation</b> 8.5 mm ID Reinforced PVC ETT <b>Maintenance</b> ; O <sub>2</sub> + N <sub>2</sub> O + Iso+ Fenta +Pavl <b>Reversed + Extubated</b> and Shifted to NSICU For Monitoring	Pulse, Resp , ECG , ABP , CVP , ABG , IMCO <sub>2</sub> , AWP , PNS , Urine O/P , BIS	Dr Dash Dr S Rao
55	22/02/06	Thulasi H V 250357 34 F	D <sub>4</sub> IDEM Meningioma	Laminectomy and Excision	Dr RMR Dr Manmeet	GA <b>Lines</b> 16G Lt Hand IV 20G Lt Radial Artery 14 – 16 Cavafix 14 G Rt Hand IV <b>Induction</b> : Fenta+ Pavl+ Thio+ Xylo <b>Intubation</b> 7.0 mm ID Reinforced PVC ETT <b>Maintenance</b> ; O <sub>2</sub> + N <sub>2</sub> O + Iso+ Fenta +Pavl <b>Reversed + Extubated</b> and Shifted to NSICU For Monitoring	Pulse, Resp , ECG , ABP , CVP , ABG , IMCO <sub>2</sub> , AWP , PNS , Urine O/P , BIS	Dr Dash Dr S Rao

56	22/02/06	Leela J 249685 63 F	Lt Acoustic Schwannoma	Lt Restromastoid Craniotomy And Decompression	Dr SN Dr Gulzar	GA <b>Lines</b> 16G Lt Hand IV 20G Lt Radial Artery 16 G Rt Hand IV Triple Lumen in IJV <b>Induction:</b> Fenta+ Pavl+ Thio+ Xylo <b>Fibre Optic Bronchoscopic Intubation</b> 7.5 mm ID Reinforced PVC ETT <b>Maintenance:</b> O <sub>2</sub> + N <sub>2</sub> O + Iso+ Fenta +Pavl <b>Reversed + Extubated</b> and Shifted to NSICU For Monitoring	Pulse, Resp , ECG , ABP , CVP , ABG , IMCO <sub>2</sub> , AWP , PNS , Urine O/P , BIS	Dr Subrat Dr Sriganesh
57	23/02/06	Jose A N 250368 62 M	Pituitary Adenoma	Transsphenoidal Decompression	Dr RMR Dr AG	GA <b>Lines</b> 16G Lt Hand IV 20G Lt Radial Artery 14 – 16 Cavafix <b>Induction:</b> Fenta+ Pavl+ Thio+ Xylo <b>Fibre Optic Bronchoscopic Intubation</b> 8.5 mm ID Reinforced PVC ETT <b>Maintenance:</b> O <sub>2</sub> + N <sub>2</sub> O + Iso+ Fenta +Pavl <b>Reversed + Extubated</b> and Shifted to NSICU For Monitoring	Pulse, Resp , ECG , ABP , CVP , ABG , IMCO <sub>2</sub> , AWP , PNS , Urine O/P , BIS	Dr Dash Dr Subru

58	23/02/06	Sindhukumari 250112 32 F	Lt Frontal Glioma	Craniotomy And Decompression	Dr HVE Dr Gulzar	GA <b>Lines</b> 16G Lt Hand IV 20G Lt Radial Artery 16 G Rt Hand IV 14 – 16 Cavafix <b>Induction</b> ; Fenta+ Pavl+ Thio+ Xylo <b>Fibre Optic Bronchoscopic Intubation</b> 7.5 mm ID Reinforced PVC ETT <b>Maintenance</b> ; O <sub>2</sub> + N <sub>2</sub> O + Iso+ Fenta +Pavl <b>Reversed + Extubated</b> and Shifted to NSICU For Monitoring	Pulse, Resp , ECG , ABP , CVP , ABG , IMCO <sub>2</sub> , AWP , PNS , Urine O/P , BIS	Prof Ratod Dr Sriganesh
59	24/02/06	Roy K J 250242 39 M	Hydrocephalus	Rt VP Shunt	Dr RMR Dr AK	GA <b>Lines</b> 16G Lt Hand IV 14 G Rt Hand IV <b>Induction</b> ; Fenta+ Morph + Pavl+ Thio+ Xylo <b>Intubation</b> 9 .0 mm ID Reinforced PVC ETT <b>Maintenance</b> ; O <sub>2</sub> + N <sub>2</sub> O + Iso+ Fenta +Pavl <b>Reversed + Extubated</b> and Shifted to NSICU For Monitoring	Pulse, Resp , Entropy , ECG , NIBP , IMCO <sub>2</sub> , AWP , PNS , Urine O/P	Dr Subrat Dr Subru
60	24/02/06	Rajeev V K 249904	Rt Thalamic Glioma	Rt Temporal Craniotomy And	Dr MA Dr Dileep	GA <b>Lines</b>	Pulse, Resp , ECG , ABP ,	Dr Smita Dr Siva

		30 M		Excision		16G Lt Hand IV 20G Lt Radial Artery 14 – 16 Cavafix <b>Induction</b> ; Fenta+ Pavl+ Thio+ Xylo <b>Fibre Optic Bronchoscopic Intubation</b> 8.5 mm ID Reinforced PVC ETT <b>Maintenance</b> ; O <sub>2</sub> + N <sub>2</sub> O + Iso+ Fenta +Pavl <b>Reversed + Extubated</b> and Shifted to NSICU For Monitoring	CVP , ABG , IMCO <sub>2</sub> , AWP , PNS , Urine O/P , BIS	
61	01/09/06	Rajendran P 253548 40 M	PIVD	Laminectomy and Decompression	Prof SN Dr KNM	GA <b>Lines</b> 16G Lt Hand IV 20G Lt Radial Artery 14 – 16 Cavafix <b>Induction</b> ; Fenta+ Pavl+ Thio+ Xylo <b>Fibre Optic Bronchoscopic Intubation</b> 8.5 mm ID Reinforced PVC ETT <b>Maintenance</b> ; O <sub>2</sub> + N <sub>2</sub> O + Iso+ Fenta +Pavl <b>Reversed + Extubated</b> and Shifted to NSICU For Monitoring	Pulse, Resp , ECG , ABP , CVP , ABG , IMCO <sub>2</sub> , AWP , PNS , Urine O/P , BIS	Dr Suneel Dr Siva
62	02/09/06	Jessy Vinod 257579 47 F	Rt PCOM Artery Aneurysm	Rt Pterional Craniotomy and Clipping	Dr GM Dr KNM	GA <b>Lines</b> 16G Lt Hand IV	Pulse, Resp , ECG , ABP , CVP , ABG ,	Dr Suneel Dr Siva

						20G Lt Radial Artery 16 G Rt Hand IV Triple Lumen in IJV Was Put With the Help Of <b>SITERITE</b> Ultrasound Doppler Machine <b>Induction</b> : Fenta+ Pavl+ Thio+ Xylo <b>Fibre Optic Bronchoscopic Intubation</b> 7.5 mm ID Reinforced PVC ETT <b>Maintenance</b> ; O <sub>2</sub> + N <sub>2</sub> O + Iso+ Fenta +Pavl <b>Reversed + Extubated</b> and Shifted to NSICU For Monitoring	IMCO <sub>2</sub> , AWP , PNS , Urine O/P , BIS	
63	06/09/06	Sunny M J 249339 50 M.	Pituitary Adenoma	Transnasal Decompression	Dr GM Dr Manmeet	GA <b>Lines</b> 16G Lt Hand IV 20G Lt Radial Artery 14 – 16 Cavafix <b>Induction</b> : Fenta+ Pavl+ Thio+ Xylo <b>Intubation</b> 8.5 mm ID Reinforced PVC ETT <b>Maintenance</b> ; O <sub>2</sub> + N <sub>2</sub> O + Iso+ Fenta +Pavl <b>Reversed + Extubated</b> and Shifted to NSICU For Monitoring	Pulse, Resp , ECG , ABP , CVP , ABG , IMCO <sub>2</sub> , AWP , PNS , Urine O/P , Entropy	Dr Manikandan Dr Smita
64	07/09/06	Faizal K M	Lt MTS	Lt ATL + AH	Dr MA	GA	Pulse, Resp ,	Dr Neema

		234968 49 M			Dr Jayanand	<p><b>Lines</b> 16G Lt Hand IV 16 G Rt Hand IV 20G Lt Radial Artery 16 – 18 Cavafix</p> <p><b>Induction</b> ; Fenta+ Pavl+ Thio+ Xylo</p> <p><b>Intubation</b> 8.5 mm ID Reinforced PVC ETT</p> <p><b>Maintenance</b> ; O<sub>2</sub> + N<sub>2</sub>O + Iso+ Fenta +Pavl</p> <p><b>Reversed + Extubated</b> and Shifted to NSICU For Monitoring</p>	ECG , ABP , CVP , ABG , IMCO <sub>2</sub> , AWP , PNS , Urine O/P , BIS	Dr Sriganesh
65	08/09/06	Nizam E 257778 18 M	Lt Temporal Glioma	Lt Temporal Craniotomy And Decompression	Dr KNM Dr Dileep	<p>GA</p> <p><b>Lines</b> 18 G Lt Hand IV 18 G Rt Hand IV 20G Lt Radial Artery 16 – 18 Cavafix</p> <p><b>Induction</b> ; Fenta+ Pavl+ Thio+ Xylo</p> <p><b>Intubation</b> 8.0 mm ID Reinforced PVC ETT</p> <p><b>Maintenance</b> ; O<sub>2</sub> + N<sub>2</sub>O + Iso+ Fenta +Pavl</p> <p><b>Reversed + Extubated</b> and Shifted to NSICU For Monitoring</p>	Pulse, Resp , ECG , ABP , CVP , ABG , IMCO <sub>2</sub> , AWP , PNS , Urine O/P , BIS	Prof Rathod Dr Smita
66	11/09/06	Annammal S 256455 45 M	Lt Posterior Petrous Meningioma	Lt Retromastoid Craniotomy And Excision	Prof SN Dr BJR	<p>GA</p> <p><b>Lines</b> 16G Lt Hand IV 20G Lt Radial Artery</p>	Pulse, Resp , ECG , ABP , CVP , ABG , IMCO <sub>2</sub> , AWP	Dr Suneel Dr Smita

						16 G Rt Hand IV Triple Lumen in IJV Was Put With the Help Of <b>SITERITE</b> Ultrasound Doppler Machine <b>Induction</b> ; Fenta+ Pavl+ Thio+ Xylo <b>Fibre Optic Bronchoscopic Intubation</b> 8.5 mm ID Reinforced PVC ETT <b>Maintenance</b> ; O <sub>2</sub> + N <sub>2</sub> O + Iso+ Fenta +Pavl <b>Reversed + Extubated</b> and Shifted to NSICU For Monitoring	, PNS , Urine O/P , Entropy	
67	13/09/06	Santhwana P 257884 7 Months	Lt Choroidplexus Pappilloma	Endoscopy Assisted Craniotomy And Excision	Dr Martin Dr GM Dr HVE	GA <b>Lines</b> 22 G Lt Hand IV 22 G Lt Femoral Artery <b>Induction</b> ; Fenta + Pavl + Sevo + Xylo <b>Intubation</b> 3.5 mm ID Reinforced PVC ETT <b>Maintenance</b> ; O <sub>2</sub> + N <sub>2</sub> O + Iso+ Fenta +Pavl <b>Reversed + Extubated</b> and Shifted to NSICU For Monitoring	Pulse, Resp , ECG , ABP , CVP , ABG , IMCO2 , AWP , PNS , Urine O/P	Dr Manikandan Dr Sriganesh
68	23/09/06	Jayalakshmi 258268 54 F	ACOM Artery Aneurysm	Lt Pterional Craniotomy And Clipping	Dr GM Dr KNM	GA <b>Lines</b> 16G Lt Hand IV	Pulse, Resp , ECG , ABP , CVP , ABG ,	Dr Suneel Dr Shan

						20G Lt Radial Artery 16 G Rt Hand IV Triple Lumen in IJV Was Put With the Help Of <b>SITERITE</b> Ultrasound Doppler Machine <b>Induction</b> ; Fenta+ Pavl+ Thio+ Xylo <b>Fibre Optic</b> <b>Bronchoscopic</b> <b>Intubation</b> 7.5 mm ID Reinforced PVC ETT <b>Maintenance</b> ; O <sub>2</sub> + N <sub>2</sub> O + Iso+ Fenta +Pavl <b>Reversed + Extubated</b> and Shifted to NSICU For Monitoring	IMCO <sub>2</sub> , AWP , PNS , Urine O/P , Entropy	
69	26/09/06	Rajeshwaran 253295 41 M	Rt MTS	Rt ATL + AH	Dr MA Dr Manmeet	GA <b>Lines</b> 16 G Lt Hand IV 14 G Rt Hand IV 20G Lt Radial Artery 16 – 18 Cavafix <b>Induction</b> ; Fenta+ Pavl+ Thio+ Xylo <b>Intubation</b> 8.5 mm ID Reinforced PVC ETT <b>Maintenance</b> ; O <sub>2</sub> + N <sub>2</sub> O + Iso+ Fenta +Pavl <b>Reversed + Extubated</b> and Shifted to NSICU For Monitoring	Pulse, Resp , ECG , ABP , CVP , ABG , IMCO <sub>2</sub> , AWP , PNS , Urine O/P , BIS	Dr Suneel Dr Smita

70	28/09/06	Madathi R 258553 45 F	ACOM Artery Aneurysm	Rt Pterional Craniotomy And Clipping	Dr GM Dr KNM	GA <b><u>Lines</u></b> 16G Lt Hand IV 20G Lt Radial Artery 16 G Rt Hand IV Triple Lumen in IJV Was Put With the Help Of <b>SITERITE</b> Ultrasound Doppler Machine <b><u>Induction</u></b> : Fenta+ Pavl+ Thio+ Xylo <b><u>Fibre Optic</u></b> <b><u>Bronchoscopic</u></b> <b><u>Intubation</u></b> 7.5 mm ID Reinforced PVC ETT <b><u>Maintenance</u></b> ; O <sub>2</sub> + N <sub>2</sub> O + Iso+ Fenta +Pavl <b><u>Reversed + Extubated</u></b> and Shifted to NSICU For Monitoring	Pulse, Resp , ECG , ABP , CVP , ABG , IMCO <sub>2</sub> , AWP , PNS , Urine O/P , Entropy	Dr Sinha Dr Siva
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SL NO	DATE	PATIENT DETAILS	DIAGNOSIS	PROCEDURE	ANAESTHESIA TECHNIQUE	MONITORING	ANAESTHETIST
01	22/03/05	Sahil D V 238440 4 M	CPS	MRI Brain	<b>Lines</b> 22 G Lt Hand IV <b>Sedation</b> With Prop + Ket + Glyco	ECG, SPO <sub>2</sub> , ETCO <sub>2</sub> , Resp, HR, Pulse	Dr Gayathri Dr Smita
02	08/04/05	Praveen V G 233967 8 M	CPS	MRI Brain	<b>Lines</b> 20 G Lt Hand IV Sedation With Glyco + Mida	ECG, SPO <sub>2</sub> , ETCO <sub>2</sub> , Resp, HR, Pulse	Dr Suneel
03	13/04/05	Mahadevan 9903659 10 Months	CPS	MRI Brain	<b>MAC + Sedation</b> <b>Lines</b> 24 G Lt Hand IV Mida + Prop	ECG, SPO <sub>2</sub> , ETCO <sub>2</sub> , Resp, HR, Pulse	Dr Suneel Dr S Rao
04	29/04/05	Aswin G 239583 4 M	Brain Stem Glioma	MRI Brain	<b>MAC + Sedation</b> <b>Lines</b> 22 G Lt Hand IV Keta + Glyco + Mida	ECG, SPO <sub>2</sub> , ETCO <sub>2</sub> , Resp, HR, Pulse	Dr Suneel Dr Deepa
05	14/08/05	Jenny C P 240016 9 F	ADEM	MRI Brain	<b>GA</b> Pt Already On Ventilator <b>Lines</b> 18 G Lt Hand IV <b>Maintenance</b> O <sub>2</sub> + Sevo + Fenta + Mida + Pavl Shifted to ICU For Elective Ventilation	ECG, SPO <sub>2</sub> , ETCO <sub>2</sub> , Resp, HR, Pulse	Dr Sinha Dr Deepa
06	16/08/05	Judy Thomas	CPS	MRI Brain	<b>MAC + Sedation</b> <b>Lines</b> 24 G Lt Hand IV Mida + Keta	ECG, SPO <sub>2</sub> , ETCO <sub>2</sub> , Resp, HR, Pulse	Dr Sinha Dr Smita
07	15/10/05	Anju Krishnan 245114 5 F	VT + RVOTO	MRI Heart	<b>GA</b> <b>Lines</b> 22 G Lt Hand IV	ECG, SPO <sub>2</sub> , ETCO <sub>2</sub> , Resp, HR, Pulse	Dr Unni Dr Mangesh

					<p><b>Induction</b> O<sub>2</sub> + Sevo + Fenta + Mida + Pavl</p> <p><b>Intubation</b> 5.0 mm ID Portex</p> <p><b>Maintenance</b> O<sub>2</sub> + Iso + Fenta + Mida + Pavl</p> <p><b>Reversed + Extubated</b> and Shifted to ICU For Monitoring</p>		
08	09/12/05	Hiba Mariyam 247717 5 F	Medulloblastoma	MRI Brain	<p><b>GA</b> <b>Lines</b> 20 G Lt Hand IV</p> <p><b>Induction</b> O<sub>2</sub> + Sevo + Fenta + Mida + Vecr</p> <p><b>Intubation</b> 4.5 mm ID Portex</p> <p><b>Maintenance</b> O<sub>2</sub> + Iso + Fenta + Mida + Vecr</p> <p><b>Reversed + Extubated</b> and Shifted to ICU For Monitoring</p>	ECG, SPO <sub>2</sub> , ETCO <sub>2</sub> , Resp , HR , Pulse	Dr Shrinivas Dr Satyaject
09	07/01/06	Muhammed 247116 6 M	Craniopharyngioma	MRI Brain	<p><b>GA</b> <b>Lines</b> 20 G Lt Hand IV</p> <p><b>Induction</b> O<sub>2</sub> + Sevo + Morph + Mida + Vecr</p> <p><b>Intubation</b> 5.5 mm ID Cuffed Portex</p> <p><b>Maintenance</b> O<sub>2</sub> + Iso + Morph + Mida +</p>	ECG, SPO <sub>2</sub> , ETCO <sub>2</sub> , Resp , HR , Pulse	Dr Pradeep Dr Siva

					Vecr <b>Reversed + Extubated</b> and Shifted to ICU For Monitoring		
10	28/07/05	Prasannakumar 241490 2 M	CHD , TOF , Single Coronary	Diagnostic Cath	<b>GA</b> <b>Lines</b> 20 G Lt Hand IV <b>Induction</b> O <sub>2</sub> + Keta + Glyco + Mida + Prop Pt Stable After Procedure	ECG, SPO <sub>2</sub> , ETCO <sub>2</sub> , Resp , HR , Pulse	Dr Arun Dr Bhupesh
11	28/07/05	Sayed S 239334 5 M	Sev AS	BAV	<b>GA</b> <b>Lines</b> 20 G Lt Hand IV <b>Induction</b> O <sub>2</sub> + Sevo + Fenta + Mida + Vecr <b>Intubation</b> 5.0 mm ID Cuffed Portex <b>Maintenance</b> O <sub>2</sub> + Iso + Fenta + Mida + Vecr <b>Reversed + Extubated</b> and Shifted to ICU For Monitoring	ECG, SPO <sub>2</sub> , ETCO <sub>2</sub> , Resp , HR , Pulse	Dr Arun Dr Bhupesh
12	03/08/05	Divya D 239726 5 M	ASD	Device Closure	<b>GA</b> <b>Lines</b> 20 G Lt Hand IV <b>Induction</b> O <sub>2</sub> + Sevo + Fenta + Mida + Pavl <b>Intubation</b> 5.0 mm ID Cuffed Portex <b>Maintenance</b>	ECG, SPO <sub>2</sub> , ETCO <sub>2</sub> , Resp , HR , Pulse	Dr Dash Dr Bhupesh

					O <sub>2</sub> + Iso + Fenta + Mida + Pavl <b>Reversed + Extubated</b> and Shifted to ICU For Monitoring		
13	06/08/05	Suja AA 240695 21 F	Corpus Callosal AVM	Embolisation	<b>GA Lines</b> 16 G Lt Hand IV 20 G Lt Radial Artery 14 – 16 Cavafix <b>Induction</b> O <sub>2</sub> + Iso + Fenta + Mida + Pavl <b>Intubation</b> 7.5 mm ID Cuffed Portex <b>Maintenance</b> O <sub>2</sub> + Iso + Fenta + Mida + Pavl <b>Reversed + Extubated</b> and Shifted to ICU For Monitoring	ECG, SPO <sub>2</sub> , ABP , ETCO <sub>2</sub> , Resp , HR , Pulse	Dr S Rao Dr Smita
14	09/09/05	Krishnan K 242442 50 M	Lt Parietal AVM	Embolisation	<b>GA Lines</b> 16 G Lt Hand IV 20 G Lt Radial Artery 14 – 16 Cavafix <b>Induction</b> O <sub>2</sub> + Iso + Fenta + Mida + Pavl <b>Intubation</b> 8.5 mm ID Cuffed Portex <b>Maintenance</b> O <sub>2</sub> + Iso + Fenta + Mida + Pavl <b>Reversed + Extubated</b> and	ECG, SPO <sub>2</sub> , ABP , ETCO <sub>2</sub> , Resp , HR , Pulse , BIS	Dr Suneel Dr Smita

					Shifted to ICU For Monitoring		
15	11/09/05	Nifas N 233139 2 M	PDA	PDA Coiling	<b>GA</b> <b>Lines</b> 20 G Lt Hand IV <b>Induction</b> O <sub>2</sub> + Keta + Glyco + Mida + Prop <b>Maintenance</b> O <sub>2</sub> + Iso + Fenta + Mida + Prop Pt Stable After Procedure	ECG, SPO <sub>2</sub> , ETCO <sub>2</sub> , Resp , HR , Pulse	Dr Unni Dr Bhupesh
16	12/12/05	Shamera P 229805 11 F	ASD	Device Closure	<b>GA</b> <b>Lines</b> 18 G Lt Hand IV <b>Induction</b> O <sub>2</sub> + Sevo + Fenta + Mida + Pavl <b>Intubation</b> 6.0 mm ID Cuffed Portex <b>Maintenance</b> O <sub>2</sub> + Iso + Fenta + Mida + Pavl <b>Reversed + Extubated</b> and Shifted to ICU For Monitoring	ECG, SPO <sub>2</sub> , ETCO <sub>2</sub> , Resp , HR , Pulse	Dr Arun
17	16/12/05	Satheesan C V 23728 36 M	Dural AVM	Embolisation	<b>GA</b> <b>Lines</b> 16 G Lt Hand IV 20 G Lt Radial Artery 14 – 16 Cavafix <b>Induction</b> O <sub>2</sub> + Iso + Fenta + Mida + Atra	ECG, SPO <sub>2</sub> , ABP , ETCO <sub>2</sub> , Resp , HR , Pulse , BIS	Dr Unni Dr Smita

					<p><b>Intubation</b> 8.5 mm ID Cuffed Portex <b>Maintenance</b> O<sub>2</sub> + Iso + Fenta + Mida + Atra <b>Reversed + Extubated</b> and Shifted to ICU For Monitoring</p>		
18	20/12/05	Sasi K S 242441 55 M	Spinal AVM	Embolisation	<p><b>GA</b> <b>Lines</b> 16 G Lt Hand IV 20 G Lt Radial Artery 14 – 16 Cavafix <b>Induction</b> O<sub>2</sub> + Iso + Fenta + Mida + Pavl <b>Intubation</b> 8.5 mm ID Cuffed Portex <b>Maintenance</b> O<sub>2</sub> + Iso + Fenta + Mida + Pavl <b>Reversed + Extubated</b> and Shifted to ICU For Monitoring</p>	ECG, SPO <sub>2</sub> , ABP , ETCO <sub>2</sub> , Resp , HR , Pulse	Dr Suneel Dr S Rao
19	22/12/05	Nithya S 239909 12 F	PDA	PDA Coiling	<p><b>GA</b> <b>Lines</b> 16 G Lt Hand IV <b>Induction</b> O<sub>2</sub> + Keta + Glyco + Mida + Prop Pt Stable After Procedure</p>	ECG, SPO <sub>2</sub> , ETCO <sub>2</sub> , Resp , HR , Pulse	Dr Suneel Dr Bhupesh
20	30/12/05	Jerin Joy 243724 13 M	Pericallosal AVM	Embolisation	<p><b>GA</b> <b>Lines</b> 18 G Lt Hand IV</p>	ECG, SPO <sub>2</sub> , ABP , ETCO <sub>2</sub> , Resp , HR ,	Dr S Rao

					20 G Lt Radial Artery 16 – 18 Cavafix <b>Induction</b> O <sub>2</sub> + Iso + Fenta + Mida + Pavl <b>Intubation</b> 8 mm ID Cuffed Portex <b>Maintenance</b> O <sub>2</sub> + Iso + Fenta + Mida + Pavl <b>Reversed + Extubated</b> and Shifted to ICU For Monitoring	Pulse	
21	07/01/06	Prakash 4 F	PDA Sev PAH	Device Closure	<b>GA Lines</b> 20 G Lt Hand IV <b>Induction</b> O <sub>2</sub> + Sevo + Fenta + Mida + Vecr <b>Intubation</b> 5.0 mm ID Cuffed Portex <b>Maintenance</b> O <sub>2</sub> + Iso + Fenta + Mida + Vecr <b>Reversed + Extubated</b> and Shifted to ICU For Monitoring	ECG, SPO <sub>2</sub> , ETCO <sub>2</sub> , Resp , HR , Pulse	Dr Gayathri Dr Bhupesh
22	09/01/06	Vineeth 245759 9 M	Osteoblastoma	Vertibral Angiogram	<b>MAC + Sedation Lines</b> 18 G Lt Hand IV Mida + Keta Pt Stable After Procedure	ECG, SPO <sub>2</sub> , ETCO <sub>2</sub> , Resp , HR , Pulse	Dr Sinha Dr Smita
23	13/02/06	Moorthy R 248429 35 M	Corp Callosal AVM	Embolisation	<b>GA Lines</b> 16 G Lt Hand IV	ECG, SPO <sub>2</sub> , ETCO <sub>2</sub> , Resp , NIBP , HR ,	Dr Gayatri Dr Shan

					<b>Induction</b> O <sub>2</sub> + Iso + Fenta + Mida + Pavl <b>Intubation</b> 8.5 mm ID Cuffed Portex <b>Maintenance</b> O <sub>2</sub> + Iso + Fenta + Mida + Pavl <u><b>Reversed + Extubated</b></u> and Shifted to ICU For Monitoring	Pulse	
24	15/02/06	Ajitha Kumari 22515 33 F	Insular AVM	Embolisation	<b>GA</b> <b>Lines</b> 18 G Lt Hand IV 20 G Lt Radial Artery 16 – 18 Cavafix <b>Induction</b> O <sub>2</sub> + Iso + Fenta + Mida + Pavl <b>Intubation</b> 7.5 mm ID Cuffed Portex <b>Maintenance</b> O <sub>2</sub> + Iso + Fenta + Mida + Pavl <u><b>Reversed + Extubated</b></u> and Shifted to ICU For Monitoring	ECG, SPO <sub>2</sub> , ABP , ETCO <sub>2</sub> , Resp , HR , Pulse	Dr Gayatri Dr Shan
25	20/02/06	Aravamudan 249717 57 M	Spinal AVM	Embolisation	<b>GA</b> <b>Lines</b> 16 G Lt Hand IV 20 G Lt Radial Artery 14 – 16 Cavafix <b>Induction</b> O <sub>2</sub> + Iso + Fenta + Mida + Pavl	ECG, SPO <sub>2</sub> , ABP , ETCO <sub>2</sub> , Resp , HR , Pulse	Dr Pradeep Dr Sriganesh

					<p><b>Intubation</b> 8.5 mm ID Cuffed Portex</p> <p><b>Maintenance</b> O<sub>2</sub> + Iso + Fenta + Mida + Pavl</p> <p><b>Reversed + Extubated</b> and Shifted to ICU For Monitoring</p>		
25	22/02/06	Ganesh 9908292 28 M	Frontal AVM	Embolisation	<p><b>GA</b></p> <p><b>Lines</b> 16 G Lt Hand IV 20 G Lt Radial Artery Triple Lumen in IJV</p> <p><b>Induction</b> O<sub>2</sub> + Iso + Fenta + Mida + Pavl</p> <p><b>Intubation</b> 8.5 mm ID Cuffed Portex</p> <p><b>Maintenance</b> O<sub>2</sub> + Iso + Fenta + Mida + Pavl</p> <p><b>Reversed + Extubated</b> and Shifted to ICU For Monitoring</p>	ECG, SPO <sub>2</sub> , ABP, CVP, ETCO <sub>2</sub> , Resp, HR, Pulse, BIS	Dr Suneel Dr S Rao
26	28/02/06	Nicy Mathew 248619 27 F	Dural AVM	Embolisation	<p><b>GA</b></p> <p><b>Lines</b> 16 G Lt Hand IV 20 G Lt Radial Artery 14 – 16 Cavafix</p> <p><b>Induction</b> O<sub>2</sub> + Iso + Fenta + Mida + Pavl</p> <p><b>Intubation</b> 7.5 mm ID Cuffed Portex</p> <p><b>Maintenance</b></p>	ECG, SPO <sub>2</sub> , ABP, ETCO <sub>2</sub> , Resp, HR, Pulse	Dr Subrat Dr S Rao

					O <sub>2</sub> + Iso + Fenta + Mida + Pavl <b>Reversed + Extubated</b> and Shifted to ICU For Monitoring		
27	14/03/06	Prasadan P A 251130 67 M	B/L CCF + ACOM Aneurysm	Embolisation	<b>GA</b> <b>Lines</b> 16 G Lt Hand IV 20 G Lt Radial Artery Triple Lumen in IJV <b>Induction</b> O <sub>2</sub> + Iso + Fenta + Mida + Pavl <b>Intubation</b> 8.5 mm ID Cuffed Portex <b>Maintenance</b> O <sub>2</sub> + Iso + Fenta + Mida + Pavl <b>Reversed + Extubated</b> and Shifted to ICU For Monitoring	ECG, SPO <sub>2</sub> , ABP , CVP , ETCO <sub>2</sub> , Resp , HR , Pulse , BIS	Dr Sinha Dr Patro
28	28/03/06	Rajan M B 200751 38 F	Lt Temporal AVM	Embolisation	<b>GA</b> <b>Lines</b> 16 G Lt Hand IV 20 G Lt Radial Artery 14 – 16 Cavafix <b>Induction</b> O <sub>2</sub> + Iso + Fenta + Mida + Pavl <b>Intubation</b> 7.5 mm ID Cuffed Portex <b>Maintenance</b> O <sub>2</sub> + Iso + Fenta + Mida + Pavl <b>Reversed + Extubated</b> and	ECG, SPO <sub>2</sub> , ABP , ETCO <sub>2</sub> , Resp , HR , Pulse	Dr Gayathri Dr Sudhakar

					Shifted to ICU For Monitoring		
29	30/03/06	Verghese A C 248904 51 M	D <sub>7</sub> AVF	Embolisation	<b>GA</b> <b>Lines</b> 16 G Lt Hand IV 20 G Lt Radial Artery 14 – 16 Cavafix <b>Induction</b> O <sub>2</sub> + Iso + Fenta + Mida + Pavl <b>Intubation</b> 8.5 mm ID Cuffed Portex <b>Maintenance</b> O <sub>2</sub> + Iso + Fenta + Mida + Pavl <b>Reversed + Extubated</b> and Shifted to ICU For Monitoring	ECG, SPO <sub>2</sub> , ABP , ETCO <sub>2</sub> , Resp , HR , Pulse	Dr Dash Dr Sriganesh
30	10/04/06	Fahad M 252117 12 M	Lt ICA Bifurcation Aneurysm	Coiling	<b>GA</b> <b>Lines</b> 18 G Lt Hand IV 20 G Lt Radial Artery Triple Lumen in IJV <b>Induction</b> O <sub>2</sub> + Iso + Fenta + Mida + Pavl <b>Intubation</b> 8 mm ID Cuffed Portex <b>Maintenance</b> O <sub>2</sub> + Iso + Fenta + Mida + Pavl <b>Reversed + Extubated</b> and Shifted to ICU For Monitoring	ECG, SPO <sub>2</sub> , ABP , CVP , ETCO <sub>2</sub> , Resp , HR , Pulse	Dr Sinha Dr Smita
31	15/05/06	Shahana N	Lt Temporal AVM	Embolisation	<b>GA</b>	ECG, SPO <sub>2</sub> ,	Dr Sinha

		253469 13 F			<b>Lines</b> 16 G Lt Hand IV 20 G Lt Radial Artery 16 – 18 Cavafix <b>Induction</b> O <sub>2</sub> + Iso + Fenta + Mida + Pavl <b>Intubation</b> 7.5 mm ID Cuffed Portex <b>Maintenance</b> O <sub>2</sub> + Iso + Fenta + Mida + Pavl <u><b>Reversed + Extubated</b></u> and Shifted to ICU For Monitoring	ABP , ETCO <sub>2</sub> , Resp , HR , Pulse	Dr S Rao
32	23/06/06	Samuel G 253795 48 M	Rt ICA Aneurysm	Coiling	<b>GA</b> <b>Lines</b> 18 G Lt Hand IV 20 G Lt Radial Artery Triple Lumen in IJV <b>Induction</b> O <sub>2</sub> + Iso + Fenta + Mida + Pavl <b>Intubation</b> 9.0 mm ID Cuffed Portex <b>Maintenance</b> O <sub>2</sub> + Iso + Fenta + Mida + Pavl <u><b>Reversed + Extubated</b></u> and Shifted to ICU For Monitoring	ECG, SPO <sub>2</sub> , ABP , CVP , ETCO <sub>2</sub> , Resp , HR , Pulse	Dr Unni Dr S Patro
33	13/07/06	Shahul H 263256 32 M	Lt Temporoparietal AVM	Embolisation	<b>GA</b> <b>Lines</b> 16 G Lt Hand IV 20 G Lt Radial Artery	ECG, SPO <sub>2</sub> , ABP , ETCO <sub>2</sub> , Resp , HR , Pulse	Dr Sinha Dr Sudhakar

					<p>16 – 18 Cavafix</p> <p><b>Induction</b> O<sub>2</sub> + Iso + Fenta + Mida + Pavl</p> <p><b>Intubation</b> 8.5 mm ID Cuffed Portex</p> <p><b>Maintenance</b> O<sub>2</sub> + Iso + Fenta + Mida + Pavl</p> <p><b>Reversed + Extubated</b> and Shifted to ICU For Monitoring</p>		
34	02/09/06	Manikandan V 183776 32 M	Spinal AVM	Embolisation	<p><b>GA</b></p> <p><b>Lines</b> 18 G Lt Hand IV 20 G Lt Radial Artery Triple Lumen in IJV</p> <p><b>Induction</b> O<sub>2</sub> + Iso + Prop + Fenta + Mida + Pavl</p> <p><b>Intubation</b> 9.0 mm ID Cuffed Portex</p> <p><b>Maintenance</b> O<sub>2</sub> + Iso + Fenta + Mida + Pavl</p> <p><b>Reversed + Extubated</b> and Shifted to ICU For Monitoring</p>	ECG, SPO <sub>2</sub> , ABP , CVP , ETCO <sub>2</sub> , Resp , HR , Pulse	Dr Shrinivas Dr Siva
35	15/09/06	Korunni V P 254515 50 M	Basalganglia AVM	Embolisation	<p><b>GA</b></p> <p><b>Lines</b> 16 G Lt Hand IV 20 G Lt Radial Artery 16 – 18 Cavafix</p> <p><b>Induction</b> O<sub>2</sub> + Iso + Fenta + Mida +</p>	ECG, SPO <sub>2</sub> , ABP , ETCO <sub>2</sub> , Resp , HR , Pulse	Dr Unni Dr S Patro

					<p>Pavl  <b>Intubation</b>                  8.5 mm ID Cuffed Portex  <b>Maintenance</b>                  O<sub>2</sub> + Iso + Fenta + Mida + Pavl  <b>Reversed + Extubated</b> and                  Shifted to ICU For                  Monitoring</p>		
36	28/09/06	Surendran P 257023 41 M	Lt ICA Gaint Aneurysm	Lt ICA Trapping	<p><b>GA</b>  <b>Lines</b>                  18 G Lt Hand IV                  20 G Lt Radial Artery                  Triple Lumen in IJV  <b>Induction</b>                  O<sub>2</sub> + Iso + Prop + Fenta +                  Mida + Pavl  <b>Intubation</b>                  9.0 mm ID Cuffed Portex  <b>Maintenance</b>                  O<sub>2</sub> + Iso + Fenta + Mida +                  Pavl  <b>Reversed + Extubated</b> and                  Shifted to ICU For                  Monitoring</p>	ECG, SPO <sub>2</sub> , ABP , CVP , ETCO <sub>2</sub> , Resp , HR , Pulse , BIS	Dr Suneel Dr Siva
37	04/05/06	Ajila R 279622 2 F	PDA	Device Closure	<p><b>GA</b>  <b>Lines</b>                  20 G Lt Hand IV  <b>Induction</b>                  O<sub>2</sub> + Sevo + Fenta + Mida +                  Vecr  <b>Intubation</b>                  4 mm ID Portex  <b>Maintenance</b>                  O<sub>2</sub> + Iso + Fenta + Mida +</p>	ECG, SPO <sub>2</sub> , ETCO <sub>2</sub> , Resp , HR , Pulse	Dr Suneel Dr Bhupesh

					Vecr <b>Reversed + Extubated</b> and Shifted to ICU For Monitoring		
38	11/05/06	Nina Reji 229163 3 F	PDA	Device Closure	<b>GA</b> <b>Lines</b> 20 G Lt Hand IV <b>Induction</b> O <sub>2</sub> + Keta + Glyco + Mida + Prop Pt Stable After Procedure	ECG, SPO <sub>2</sub> , ETCO <sub>2</sub> , Resp, HR, Pulse	Dr Bhupesh Dr Siva
39	01/06/06	Safeer C P 9705783 15 M	Bicuspid AV	BAV	<b>GA</b> <b>Lines</b> 20 G Lt Hand IV <b>Induction</b> O <sub>2</sub> + Sevo + Fenta + Mida + Vecr <b>Intubation</b> 7.5 mm ID Cuffed Portex <b>Maintenance</b> O <sub>2</sub> + Iso + Fenta + Mida + Vecr <b>Reversed + Extubated</b> and Shifted to ICU For Monitoring	ECG, SPO <sub>2</sub> , ETCO <sub>2</sub> , Resp, HR, Pulse	Dr Subrat Dr Shan
40	08/06/06	Arun Kumar 252224 13 M	ASD, Sev PAH	ASD Device Closure	<b>GA</b> <b>Lines</b> 20 G Lt Hand IV <b>Induction</b> O <sub>2</sub> + Keta + Glyco + Mida + Prop Pt Stable After Procedure	ECG, SPO <sub>2</sub> , ETCO <sub>2</sub> , Resp, HR, Pulse	Dr Rupa Dr Shan
41	15/96/06	Lekshmi S P	PDA	Device Closure	<b>GA</b>	ECG, SPO <sub>2</sub> ,	Dr Subrat

		252147 6 F			<b>Lines</b> 20 G Lt Hand IV <b>Induction</b> O <sub>2</sub> + Sevo + Fenta + Mida + Vecr <b>Intubation</b> 6 mm ID Cuffed Portex <b>Maintenance</b> O <sub>2</sub> + Iso + Fenta + Mida + Vecr <b>Reversed + Extubated</b> and Shifted to ICU For Monitoring	ETCO <sub>2</sub> , Resp , HR , Pulse	Dr Subbu
42	03/08/06	Priya S 253718 7 F	ASD	ASD Device Closure	<b>GA</b> <b>Lines</b> 18 G Lt Hand IV <b>Induction</b> O <sub>2</sub> + Keta + Glyco + Mida + Prop Pt Stable After Procedure	ECG, SPO <sub>2</sub> , ETCO <sub>2</sub> , Resp , HR , Pulse	Dr Arun Dr S Patro
43	03/08/06	Benish D 252628 12 M	PDA	Device Closure	<b>GA</b> <b>Lines</b> 18 G Lt Hand IV <b>Induction</b> O <sub>2</sub> + Keta + Glyco + Mida + Prop Pt Stable After Procedure	ECG, SPO <sub>2</sub> , ETCO <sub>2</sub> , Resp , HR , Pulse	Dr Arun Dr S Patro
44	10/08/06	Harikrishnan 249507 13 M	Atrial Flutter	EPS	<b>GA</b> <b>Lines</b> 20 G Lt Hand IV <b>Induction</b> O <sub>2</sub> + Sevo + Fenta + Mida + Vecr	ECG, SPO <sub>2</sub> , ETCO <sub>2</sub> , Resp , HR , Pulse	Dr Suneel Dr Ganesh

					<p><b>Intubation</b> 7.5 mm ID Cuffed Portex</p> <p><b>Maintenance</b> O<sub>2</sub> + Iso + Fenta + Mida + Vecr</p> <p><b>Reversed + Extubated</b> and Shifted to ICU For Monitoring</p>		
45	27/08/06	Nahila B 254113 3 F	PDA	Device Closure	<p><b>GA</b></p> <p><b>Lines</b> 20 G Lt Hand IV</p> <p><b>Induction</b> O<sub>2</sub> + Sevo + Fenta + Mida + Vecr</p> <p><b>Intubation</b> 3.5 mm ID Portex</p> <p><b>Maintenance</b> O<sub>2</sub> + Iso + Fenta + Mida + Vecr</p> <p><b>Reversed + Extubated</b> and Shifted to ICU For Monitoring</p>	ECG, SPO <sub>2</sub> , ETCO <sub>2</sub> , Resp, HR, Pulse	Dr Arun Dr Siva