## DEPARTMENT OF ANESTHESIOLOGY



Standard Operating Procedure Title: Recovery Room Resident

**Policy Number:** C 80 **Date Established:** 1987

**Date Reviewed:** 7/1/90; 6/9/95; 4/26/16

**Date Revised:** 3/22/97; 4/18/00; 5/19/03; 3/7/06

The recovery room resident (PACU/CPR) should be available for management of complications or special issues in the recovery room, preoperative evaluation, hospital CPR support, and emergent intraoperative care.

The recovery room resident should usually (unless otherwise busy) stand by during each new patient "report" when patients return from the operating room. They should assist with "set up," monitoring, and discontinuance of respirators and endotracheal tubes in coordination with the primary anesthesiologists and surgeons. The recovery room resident should assist the nurses in care of special problems, respiratory obstruction, etc. The recovery room resident should remain available to start arterial lines, central lines, and Swan-Ganz catheters preoperatively if the primary resident cannot do so. The PACU/CPR resident should keep a record of patient interventions for his learning portfolio and report to the Preop Rounds on the last Wednesday of his rotation to the other residents on his 2-week period.

Reviewed: April 16