

Riverside

Clay

Patient Label

Southside

St Johns

## **Radiology Post Procedure Note**

<b>Procedure:</b>	Radiologist:				
Guidance:	СТ	US	Fluoro	Mammo	
Findings:					
All equipment	that entered the p	atient during the pro	cedure appea	red intact at the conclusion	of the procedure.
Please see full	report under Rad	iology for procedure	details.		
Anesthesia:	local only	moderate sedatio	n general	anesthesia	
Specimen:	none	yes sent to lab			
Drain(s):					
Estimate Bloo	d Loss: Minima	1.			
Complications	No immediate	complications.			
Post Procedur	e Condition: Th	ne patient tolerated th	ne procedure	well and left the procedure	room in
stable cond	ition.				

**Physician Signature** 

**Printed Name** 

PAS#

**Date/Time** 

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