Klinik Surgeri
Poliklinik Tingkat Satu
Pusat Perubatan Universiti Malaya

DAY SURGERY UNIT

PRE-ADMISSION PROGRAMME

Pre-operative History and Physical

Examination Form

PATIENT LABEL

Registration No : 36728340

Name : Nufael Ayden

Date Of Birth : _____ Sex : M

NOTE TO DOCTOR : Return completed form to Pre-Operative Anaesthetic Clinic by Pre – admission visit

Information is valid for a maximum of one month prior to scheduled date of surgery

Day Of Surgery : 6/4/23 → 13/4/2023

Type Of Surgery : Palatoplasty

Admission Status : DSU ☐ DSU – 23 HR ☐ DOSA ☐ IN PATIENT ☐

Chief Complaint : Left unilateral cleft lip and palate
Done lip repair (Modified millard on 15/6/22) at HUSM

History of Present Illness : .....

Functional Inquiry

YES	NO		If yes, comments :
☐	☑	Heart disease	.....
☐	☑	High blood pressure	.....
☐	☑	Pulmonary disease	.....
☐	☑	Renal / hepatic / GI disease	.....
☐	☑	Endocrine disease	.....
☐	☑	Neurologic disorder	.....
☐	☑	Allergies	.....
☐	☑	Medication	.....
☐	☑	Previous surgical procedures	.....

Physical Examination :

Pulse ..... BP ..... Height ..... cm Weight ..... kg

Cardiovascular system : Normal ☐ Respiratory system : Normal ☐ Neurologic system : Normal ☐

Abnormalities : .....

Diagnosis : .....

Doctor's Name : DR. OOI ZHI YAN
No. Pendaftaran Sementara MPM: 92899
Pegawai Perubatan Siswazah
Pusat Perubatan Universiti Malaya
(PLEASE PRINT)

Contact Number : 64

Doctor's Signature : _____

Date : 16/2/23