

e-op Ie	esting Guidelines for Int	ermediate and high risk operations only		***Non-fasting specimens accepted unless ot							unless othe	erwise specified.		
			EKG <sup>1</sup>	CXR <sup>2</sup>	WCBC	BUN/Creat/Lytes	Ca+	PT/INR	LFT	BS	Preg test	UA	Drug Level	
		Acceptable age of study w/in months	3 mo	6 mo	1 mo	3 mo	1 mo	3 mo	6 mo	3 mo	2 wks		3 mo	
High Risk Surgery Intermediate Risk -		Major or peripheral vascular surgery with major blood loss or fluid shifts involving the head, chest, or abdomen + see Intermediate Risk	•	•	•	•								
		Carotid, uncomplicated head & neck, intra- abdominal, thoracic, hip and related orthopedic + see Low Risk	al, thoracic, hip and related orthopedic + See clinical indicators below for recommended tests											
	Age	Male/Female > or = 65			•	•		[			1		1	
		Menstruating Females			•						• <sup>5</sup>			
С	Smoking (w/in 5 yrs)	> or = 40	•											
I	Alcohol/Drug History								•				•7	
i	Medications Cardiac Disease	ACEI, ARB				•							1	
n		Diuretic				•								
		Steroid				•				•				
•		Anticoagulation						• w/in 3 wks <sup>8</sup>						
С		Chemotherapy			•									
а		valproic acid (Depakene) - digoxin											•	
		phenytoin (Dilantin) - lithium - phenobarbitol											•	
•		carbamazepine (Tegretol) - theophylline Cardiac Disease/PVD/HTN	•		•	•							•	
		Cardiac Disease/PVD/HTN CHF	•	•	•	•							+	
I	Pulmonary Disease	COPD	•	•9									1	
n		Obstructive Sleep Apnea	٠										1	
d	GI	Bleed			DOS <sup>6</sup>									
i	Renal Disease	Liver Disease			•			•	•					
c		Insufficiency	•		•	•								
a		Dialysis	•		DOS <sup>6</sup>	DOS <sup>6</sup>		•						
		Urinary Symptoms										•	1	
τ	Endocrine	Diabetes Mellitus	•			•				• <sup>3</sup>			1	
0		Family History of Diabetes Mellitus												
r		Morbid obese (BMI > 35)	•							٠				
		Thyroid	•											
S		Parathyroid disease	•				•							
	Hematologic Disease	Metastatic Cancer			•		•		•					
	~	History of Anemia/Bleeding			•								<u></u>	
Low Risk		Refer to Preop Prep Guidelines												

Pre-op Testing Guidelines for Intermediate and high risk operations only

\*\*\*Non-fasting specimens accepted unless otherwise specified.

<sup>1</sup> EKG - w/in 3 weeks for active cardiac problems/symptoms.

<sup>2</sup> CXR - w/in 3 weeks for active cardiac/respiratory problems or recent abnormal CXR.

<sup>3</sup> BS - Fasting glucose w/in 3 weeks, consider HgAIC.

\* Trough levels within 3 months or recent change in dose.

<sup>°</sup> Pregnancy test w/in 14 days of surgery or normal period or menopausal

or signed waiver or prior sterilization.

<sup>6</sup> Day of surgery - or following last episode of dialysis for dialysis patients

<sup>7</sup> Alcohol or drug screen if active use suspected

 $^{\rm s}\,{\rm PT}$  day of surgery if warfarin dosing within 5 days of surgery or previously supra-therapeutic

<sup>9</sup> If change in symptoms over last 6 months

## References -

\*ACC/AHA 2007 Guidelines on Periop Cardiovascular Evaluation and Care for Noncardiac Surg \*Best Practice for Preoperative Testing; Perioperative Medicine Summit, Univ. of Miami, 2013 \*Practice Advisory for Preanesthesia Evaluation-Updated; Anesthesiology 2012; 116:522-538 \*Preoperative Medical Evaluation of the Healthy Patient; Up-to-date Current through 3/13

\*Preoperative Hct Levels & Post-op Outcomes in Older Pts Undergoing Non-cardiac Surgery

\*Advisory AHA (Obese Patient) Circ July 7, 2009; 120(1):86-95

\*ACS NSQIP AGS Geriatric 2012 Guidelines \*Millers Anesthesia, 7th edition 2009