

## PRE-SURGICAL TESTING GUIDELINES

<i>PATIENT TYPE</i>	<i>INDICATED PRE-SURGICAL TESTS</i>	
<b>All Patients</b>	History & Physical within 7 days of scheduled procedure and appropriate testing	
<b>Infants</b> (Under 1 year of age)	Hb/Hct	
<b>Children</b> (18 years or less)	No routine testing unless indicated by history or surgical procedure	
<b>Male 45 years or less</b>	No routine testing unless indicated by history or surgical procedure	
<b>Females of Childbearing age</b>	Hb/Hct, UCG/BhCG	
<b>Age 45 years or greater</b>	H&H, SMA7, ECG	
<i>Assuming no change in interval disease status tests are valid for the following time frames:</i>	ECG's	Four (4) weeks
	CXR	One (1) year
	Blood work	Four (4) weeks
<b>FOR MAJOR SURGICAL PROCEDURES</b>		
Procedures with expected blood loss greater than 200cc, with possible major hemodynamic shifts (e.g. total joint, spine, radical resections, AAA, thoracic, bowel, liver, pancreas cases etc.)	CBC, PLT, SMA7, ECG, CXR,PT/PTT , Type & Screen or Type & Cross in addition to above	
<b>FOR PATIENTS ON MEDICATIONS</b>		
<b>ACE Inhibitors</b>	SMA7, ECG	
<b>Anticoagulants</b>	CBC, PT/PTT/INR	
<b>Anticonvulsants</b>	Drug Level	
<b>Digoxin</b>	SMA7, ECG, Drug Level	
<b>Diuretics</b>	SMA7, ECG	
<b>Lithium</b>	Hb/Hct, SMA7, ECG, Li Level	
<b>Radiation Therapy</b>	CBC, ECG, CXR	
<b>Steroids</b>	SMA7	
<b>Theophylline</b>	Drug Level CBC, SMA7, ECG	
<b>FOR SPECIFIC DISEASES</b>		
<b>Hypertension</b>	Hb/Hct, SMA7, ECG	
<b>Diabetes Mellitus</b>	CBC, SMA7, ECG	
<b>Cardiovascular Disease</b>	CBC, SMA7, ECG, CXR	
<b>Pulmonary Disease</b>	ECG, CXR	
<b>ESRD/Renal Disease</b>	CBC, PLT, SMA7, ECG, CXR	
<b>Symptomatic Thyroid Disease</b>	TSH, Free T4, ECG	
<b>Hepatic Disease / ETOH Abuse</b>	CBC, SMA7, LFTs, PT/PTT, ECG	
<b>Smoker</b> (1PPD x 20 years, Ex- smoker less than 10 yr)	CXR	
<b>Symptomatic Thyroid Disease</b>	TSH, Free T4, ECG	
<b>BMI 35 or greater</b>	CBC, SMA7, ECG	
<b>Bleeding Disorder</b>	CBC, PT/PTT, PLT, Type & Screen/Cross	
<b>Pease note:</b> ♦ <b>Additional tests should be ordered at the discretion of the practitioner.</b> ♦ <b>Contact PST for questions - 718 630-7192</b>		

### **PRE-OPERATIVE MEDICAL EVALUATION**

- ❖ A medical evaluation must be obtained preoperatively for all patients with unstable, unusual, or poorly controlled diseases.
- ❖ Remember, the information you provide about your patient helps the perioperative team care for your patient in the safest manner possible.
- ❖ Medical evaluations up to one (1) month old will be considered acceptable if no interval change in the patient's condition has occurred.

#### **Examples of conditions mandating a pre-operative medical evaluation:**

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| <ul style="list-style-type: none"> <li>• History of Cardiac Disease</li> <li>• Stroke</li> <li>• Recent abnormal ECG changes</li> <li>• Poor Exercise Tolerance</li> <li>• Non Complaint with Medications</li> <li>• Poorly controlled hypertension</li> <li>• Insulin dependent diabetes</li> </ul> | <ul style="list-style-type: none"> <li>• Morbid Obesity</li> <li>• Symptomatic pulmonary disease e.g. asthma, COPD</li> <li>• Poorly controlled seizures</li> <li>• Active Asthma or URI</li> <li>• Renal or hepatic disease</li> <li>• Bleeding disorders</li> <li>• Alcohol or Drug Abuse</li> </ul> |
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#### **A pre-operative evaluation of cardiac status should be obtained for:**

- Patients at risk for perioperative cardiac morbidity or mortality
- Patients with poor or unknown functional capacity
- Patients with active cardiac conditions, such as a recent MI, recent stent placement, significant or symptomatic arrhythmias, implanted rhythm devices, valvular disease or replacement, going for any procedure
- Patients with cardiac risk factors including history of CAD (angina, MI), CHF, diabetes, stroke, hypertension, renal insufficiency, morbid obesity for all but minimally invasive procedures
- For details see the document “**Preoperative Cardiac Evaluation for Non-cardiac Surgery**” which can be found on the LMC intranet, the Physician's Portal, and at [www.lmcm.com/pst](http://www.lmcm.com/pst)

#### **Pre-operative Medical Evaluation “DOs”**

Acceptable evaluations should include:

- ❖ Patient History including baseline status
- ❖ Past Surgical History
- ❖ Medications
- ❖ Allergies
- ❖ Social History
- ❖ Detailed information about implants such as stents, AICD's or pacemakers
- ❖ Physical Exam
- ❖ Relevant labs and tests
- ❖ Exercise tolerance
- ❖ Recommendations including:
  - Assessment of the surgical risk and the overall patient risk for the planned procedure
  - Additional preoperative testing or consultations required
  - Perioperative medication regimens (i.e. management of antiplatelet agents, anticoagulants, insulin)
  - Perioperative monitoring suggestions

#### **Pre-operative Medical Evaluation “DON'Ts”**

Isolated statements such as the following are not helpful and are unacceptable medical evaluations:

- ❖ “Cleared for surgery”
- ❖ “Medically stable”

Recommendation of a specific type of anesthesia (i.e. “cleared for spinal”) is often counterproductive and may lead to procedural delays.