PREOPERATIVE ANESTHESIA REQUIREMENTS

A preoperative History & Physical Examination must be completed within 30 days of surgery, unless otherwise directed. Ridgeview Surgery recommends that the pre-op physical be completed 48 hours prior to the surgery to allow time for the processing of tests.

Please fax the History & Physical document to:	952-442-6037 (fax) for **Waconia** surgeries	952-442-6037 (fax) for **Chaska** surgeries ***(Orthopedic Institute)***	507-964-8444 (fax) for **Arlington** surgeries	507-665-3812 (fax) for **Le Sueur** surgeries

1. Patients should take **cardiovascular, pulmonary, reflux or seizure medication** as prescribed by physician for the morning of the surgery. Any medications should be taken with a small glass of water, no less than two hours before scheduled arrival time.
2. **Diabetics:** Patients on oral medication for diabetic control should take the evening dose, but to hold the morning dose the day of surgery. Insulin-dependent diabetics should follow the recommendations of the prescribing physician. Goal blood glucose of 140-180 for the day of surgery. Notify surgeon if HbA1c is 7.5 or greater.
3. **GLP1 Agonists:** Patients taking GLP1 agonists (Ozempic®, Wegovy®, Trulicity®, etc.) should hold their injectable medication one week prior to the scheduled elective procedure and should hold oral medication day of the surgery.
4. **Pulmonary Disease:** Patients with asthma or COPD should use inhalers the morning of surgery. Bring the inhaler along to Surgical Services. If available, please acquire an O2 saturation reading on the day of examination.
5. **Blood Thinners:** Patients on anticoagulant medication should follow the instructions of the prescribing physician and coordinate with surgeon.
6. Patients with an **implantable cardioverter defibrillator** (ICD) need preoperative interrogation within 6 months. Patients with **implanted pacemakers** need interrogation within 12 months. Patients should bring their ICD/pacemaker information with them the day of surgery.
7. For patients with established cardiologist care, the cardiologist should be notified of the patient's upcoming surgery and confirm if preoperative cardiac testing or clearance is required.

ECG REQUIREMENTS:

1. Patients reporting or documented history of ischemic heart disease (MI, positive stress test, current chest pain, use of nitrate therapy, previous cardiac stenting, previous cardiac bypass), congestive heart failure, arrhythmia, peripheral vascular disease, cerebral vascular disease or transient ischemic attack, COPD
2. Patients reporting or documented history of chronic kidney disease stage 3 or greater (GFR <60 or creatinine >2 mg/dL)
3. Patients reporting or documented history of diabetes treated with insulin-containing medications or >1 oral hypoglycemic medication
4. Exclusion population:
   a. ECG has been completed within 6 months
   b. Patients having eye procedures under Monitored Anesthesia Care (MAC) anesthesia

LAB REQUIREMENTS:

- **Hemoglobin:**
  1. Patients with recent bleeding 2. Patients with chronic anemia or a history of anemia 3. All menstruating females
- **Blood Glucose or Accucheck:** For all diabetics
- **Potassium:**
  1. Patients receiving diuretics within 30 days
  2. Patients taking Digoxin
  3. Patients on any potassium depleting medication
  4. Patients with hypokalemia
  5. Patients with new diuretic script or dosage change within the past 30 days must have their potassium level drawn and reported within 48 hours of the surgical procedure.
- **INR:** Patients on Coumadin must have within 48 hours of procedure. Notify surgeon if the INR is greater than 2.5.
  *No INR's are needed for patients having cataract surgery with phacoemulsification technique.
- **HCG/UPT – to be done within 7 days prior to surgery date or else morning of surgery, for all menstruating females.**
  For patients having gynecological surgery, HCG has to be done morning of surgery.
  **** Menstruating females over the age of 12 are required to have a pregnancy test done.**

<u>In addition to the preoperative requirements from anesthesia above, these additional tests are required by procedure:</u>

Total Joint Replacement Requirement (Knee, Hip, Ankle, Shoulder, Elbow):
- Heme Profile
- UA/UC if patient is symptomatic for UTI
- Basic Metabolic

Prostatectomy:
- Creatinine
- Hemoglobin

Hysterectomy:
- Hemoglobin

Bariatric Roux-en-Y procedure or Gastric sleevectomy: • Heme Profile with diff • Basic Metabolic • PT/INR

If there are any additional questions regarding preoperative requirements, please contact the Ridgeview Surgery pre-op nurse extension at:

952-777-5149 (phone) for **Waconia** surgeries	952-443-4830 (phone) for **Chaska** surgeries ***(Orthopedic Institute)***	507-964-8459 (phone) for **Arlington** surgeries	507-593-8420 (phone) for **Le Sueur** surgeries