



Pre-Surgery Diagnosis: _____ Scheduled Procedure: _____
Date of Procedure: _____ Allergies: _____ Precertification #: _____

☐ No Lab Tests Required

☐ Anesthesiology Consultation(Patients with Medical or Surgical issues)

- | | | |
|--|--|---|
| <input type="checkbox"/> Hgb/Hct | <input type="checkbox"/> Urine HCG | <input type="checkbox"/> Type and Screen |
| <input type="checkbox"/> CBC without diff | <input type="checkbox"/> Serum Pregnancy | <input type="checkbox"/> Crossmatch ____ # units PRBCs |
| <input type="checkbox"/> CBC w/diff | <input type="checkbox"/> Quant. HCG | <input type="checkbox"/> Crossmatch ____ # units autologous Blood |
| <input type="checkbox"/> PT | <input type="checkbox"/> HBsAg | <input type="checkbox"/> Other blood products _____ |
| <input type="checkbox"/> PTT | <input type="checkbox"/> Sickle Cell Screening | <input type="checkbox"/> CXR |
| <input type="checkbox"/> CMP | <input type="checkbox"/> Amylase | <input type="checkbox"/> KUB |
| <input type="checkbox"/> BMP | <input type="checkbox"/> Lipase | <input type="checkbox"/> Other X-ray _____ |
| <input type="checkbox"/> Blood Glucose | <input type="checkbox"/> Hepatic Panel | <input type="checkbox"/> Ultrasound _____ |
| <input type="checkbox"/> FSBS Day of Surgery | <input type="checkbox"/> COVID Swab | <input type="checkbox"/> 12 lead ECG |
| <input type="checkbox"/> Uric Acid | <input type="checkbox"/> Other Lab | <input type="checkbox"/> PFT |
| <input type="checkbox"/> Urinalysis w/ Micro | <input type="checkbox"/> MRSA Screen | <input type="checkbox"/> Urine for nicotine day of surgery (EGD and Lap Gastric Sleeve) |

Blood for pre-transfusion testing must be drawn within 48 hours of surgery. Typed and Screened blood can only be held 48 hours.

Pre-Surgery Orders ☐ OPS (Outpatient Surgery) ☐ IP (Inpatient) ☐ Unknown Length of Stay

Vital Signs: ☐ Per Protocol ☐ Other _____ ☐ LR at KVO or ☐ 100ml/hr ☐ 200ml/hr ☐ ____ ml/hr

Diet: ☐ NPO ☐ NPO after _____ ☐ NS at KVO or ☐ 100ml/hr ☐ 200ml/hr ☐ ____ ml/hr

☐ ERAS Protocol: ☐ NS (500ml bag) at KVO via microdrip tubing for renal patient

Ensure Pre-Surgery Clear Carbohydrate Drink:10 ounces, Give 2 –3 hours before induction of anesthesia. Consume product within 5 minutes.

Exclude Pts w/HX of: Diabetes Type 1, Uncontrolled diabetes, Hemoglobin A1C>7.5% or per provider's direction, Uncontrolled GERD, Gastric emptying complications, Hiatal hernia, Dysphagia and is on thickened liquids.

☐ PRP Draw in ASU

Pre Op Antibiotics:

☐ Pre-Op Antibiotic in ASU/OR holding area _____

☐ Bacterial Endocarditis Prophylaxis: _____ ☐ Consult Pharmacy/Anesthesia

☐ Ancef 2gm IVPB x 1 on call to OR (Start within 60 min of incision) **for pt weight < 120kg**

☐ Ancef 3gm IVPB x 1 on call to OR (Start within 60 min of incision) **for pt weight > 120kg**

If allergic to PCN/B Lactam Allergy OR Patient at increased risk for infection.

☐ Vancomycin 1gm IVPB x 1 on call to OR (Start within 120 min of incision) Pharmacy to renal dose for pt weight < 70 KG

☐ Vancomycin 15mg/kg IVPB x 1 on call to OR (Start within 120 min of incision) Pharmacy to renal dose for pt weight ≥ 70 KG
OR

☐ Cleocin 900mg IVPB x 1 on call to OR (Start within 30 min of incision)

******Pediatric Patient Pre Op Antibiotics******

☐ Ancef weight based per Pharmacy on call to OR (Start within 60 min of incision)

☐ If allergic to Ancef notify MD for alternative.

☐ Other: _____



AMBULATORY SURGERY UNIT LAB & DIAGNOSTIC TESTS

Pre Op Medications:

- ☐ Heparin 5,000 Units SubQ
- ☐ Acetaminophen (Tylenol) suppository by weight in ASU/OR 15mg/kg (Max 650mg)
- ☐ Acetaminophen (Ofirmev) 1000 mg IVPB on call to OR
- ☐ Ibuprofen (Caldolor) 800 mg IVPB (on-call to OR)
- ☐ Ketorolac (Toradol) 30 mg IVP x 1 (on-call to OR)
- ☐ Gabapentin 300 mg PO x 1 pre-op
- ☐ Scopolamine Patch 1.5 mg
- ☐ Other _____

Consults:

- ☐ OT/PT Consult
- ☐ Care Management Consult

Consult Anesthesia for post-op pain block

- ☐ Yes ☐ No (Type of block) _____

Preparation:

- ☐ Incentive Spirometry: Instructions/pre-admit
- ☐ Thigh / Knee High TED hose
- ☐ Sequential Compression Device applied and turned on in OR
- ☐ Patient Education

Minimum Testing Guidelines (Anesthesia Service): These guidelines are suggested minimums. They are not replacement for medical judgment, and the patient's medical history and/or the proposed surgical procedure may indicate additional laboratory or diagnostic testing.

No pre-operative laboratory testing is required for asymptomatic patients without significant medical problems who are less than 40 years of age.

ECG: Males aged 40 and above require an ECG. Females aged 50 and above require ECG

Pregnancy Test: A pregnancy test is required for all menstruating females, unless not indicated due to sterility. Serum HCG if blood is drawn for other tests, otherwise it will be a urine HCG.

Labs: CBC and BMP are required for patients age 65 and older. BMP is required for diabetic, renal and/or hypertensive patients. FSBS is required day of surgery in diabetic patients, except in patient who have a BMP done day of surgery.

Copies: A copy of a CXR and/or ECG completed in the past 6 months is sufficient in the absence of a change in the patient's health status.

A copy of lab work completed in the past 30 days is sufficient in the absence of renal disease. Renal patients must have a K+ completed after their last dialysis treatment before the date of surgery.

IVF: Every patient over age 10 is required to have an IV of LR at KVO rate. Renal patients must have NS at KVO rate

Physician Signature

Date / Time