

# Anesthesia Preoperative Testing Guidelines

## Sinai Hospital of Baltimore Department of Anesthesia Policy

**PURPOSE:** To provide guidelines for laboratory, X-ray, and EKG examinations prior to operative or invasive procedures requiring anesthesia.

**POLICY:** All patients undergoing operative or invasive procedures involving the Department of Anesthesiology will be assessed in accordance with the following guidelines:

- All H & P's (Preoperative History & Physical Examination Forms), Surgical Consents and Labs should be received by PASS (Pre-Anesthesia Screening Services) within three working days, seventy-two (72) hours prior to surgery. **Patients with incomplete data at twenty-four (24) hours will be rescheduled.** Names and dates are needed on all test results.
- **H & P (Preoperative History & Physical Examination Forms):** Is valid for all patients up to 30 days prior to surgery/procedure.

Preoperative Laboratory Testing <sup>1</sup>	Indication
Healthy patient <65	<ul style="list-style-type: none"> <li>• No testing needed</li> </ul>
EKG	<ul style="list-style-type: none"> <li>• Age &gt; 65</li> <li>• Cardiovascular disease includes anyone with congenital heart disease, COPD, coronary or valvular heart disease, hypertension, arrhythmia, history of heart failure, or pacemaker / AICD. The EKG is valid for 3 months for these patients unless there is a change in their medical condition</li> <li>• In patients who are &gt; 65 years old without cardiovascular disease the EKG is valid for 6 months unless there is a change in their medical condition</li> <li>• Thoracic/major vascular procedure need an EKG</li> <li>• Diabetes age &gt; 50</li> </ul>
Chest X-ray	<ul style="list-style-type: none"> <li>• None based on age</li> <li>• Not indicated unless warranted by patient's clinical condition (pneumonia, pulmonary edema, mediastinal mass)</li> </ul>
CBC (Complete Blood Count) (Hct, platelet count)	<ul style="list-style-type: none"> <li>• History of anemia</li> <li>• Procedure with anticipated significant blood loss, greater than &gt; 5% of estimated blood volume</li> <li>• History of bleeding disorder (myeloproliferative disease, sickle cell disease)</li> <li>• Patients having spinal or epidural anesthesia</li> </ul>

<b>Glucose</b>	<ul style="list-style-type: none"> <li>• Diabetes mellitus or risk factors/symptoms (obesity, polyuria, polydipsia)</li> </ul>
<b>Serum electrolytes</b>	<ul style="list-style-type: none"> <li>• Diabetes mellitus and other endocrine disorders, renal disease, hepatic disorders</li> <li>• Post dialysis patients</li> <li>• Medications affecting or affected by electrolytes, (diuretics, digoxin)</li> </ul>
<b>Liver function tests</b>	<ul style="list-style-type: none"> <li>• Cirrhosis or history of liver disease</li> </ul>
<b>Coagulation tests (PT/PTT)</b>	<ul style="list-style-type: none"> <li>• History of bleeding disorder, liver disease, or malnutrition</li> <li>• Patients on anticoagulants (warfarin, heparin)</li> </ul>
<b>Pregnancy test</b>	<ul style="list-style-type: none"> <li>• Required for all women of menstrual age, except those who had a hysterectomy, tubal ligation, or menopause (passage of at least one year without menses at age 45 or older)</li> <li>• Pregnancy test is good for 7 days</li> </ul>
<b>Type &amp; Screen/Cross</b>	<ul style="list-style-type: none"> <li>• Patients who may lose 5% of their blood volume. (See Minimal Blood Order Sheet)</li> </ul>

<sup>1</sup>Steven L. Cohn, Perioperative Medicine, DOI: 10.1007/978-0-85729-498-2, © Springer-Verlag London Limited 2011