

# Patient Medications Prior to Surgery

## Sinai Hospital of Baltimore

### DRUGS TO TAKE PRIOR TO SURGERY:

- BETA BLOCKERS: If you are on a Beta Blocker, continue your normal dose regimen and take with a sip of water.
- NARCOTIC ANALGESICS: If you have chronic pain and require pain medicine every day, continue your regular schedule and take your medicine with a sip of water.

### DIURETICS: Do not take on the day of surgery.

- ALDACTAZIDE (Spironolactone and HCTZ)
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- BUMEX (Bumetanide)
- DIUCARDIN (Hydroflumethiazide)
- DIURIL (Chlorothiazide)
- DYAZIDE, MAXZIDE (Triamterene and HCTZ)
- DYRENIUM (Triamterene)
- EDECRIN (Ethacrynic Acid)
- ENDURON (Methyclothiazide)
- ESIDRIX, HYDRODIURIL, MICROZIDE, ORETIC (HCTZ)
- LASIX (Furosemide)
- LOZOL (Indapamide)
- MIDAMOR (Amiloride)
- MODURETIC (Amiloride and HCTZ)
- MYKROX, ZAROXOLYN (Metolazone)
- RENESE (a component of MINIZIDE) - (Polythiazide)
- THALITONE (Chlorthalidone)

### ANGIOTENSIN RECEPTOR BLOCKERS: Take the day before surgery, but do not take the day of surgery (undergoing general anesthesia).

**Exception:** Patients with uncontrolled hypertension who are on multiple medications to treat blood pressure, take 1/3 the usual dose on the day of surgery.

- ATACAND, ATACAND HCT (Candesartan)
- AVALIDE, AVAPRO (Irbesartan)
- BENICAR (Olmesartan)
- COZAAR, HYZAAR (Losartan)



Rubin Institute for  
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**CARE BRAVELY**

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- DIOVAN, DIOVAN HCT (Valsartan)
- MICARDIS (Telmisartan)
- PRINIVIL, TENSOPRIL, ZESTRIL, HIPRIL (lisinopril)
- TEVETEN (Eprosartan)

**HERBAL MEDICATIONS: Stop taking them 1 WEEK before surgery.**

- ECHINACEA
- EPHEDRA (Ma-Huang)
- FEVERFEW
- GARLIC
- GINGER
- GINKGO (Ginkgo biloba)
- GINSENG
- GOLDENSEAL
- KAVA-KAVA
- LICORICE
- SAW PALMETTO
- VALERIAN

**DIET MEDICATIONS (PRESCRIBED, OTC, HERBAL): Stop taking them 1 WEEK before surgery.**

- PHENTERMINE
- TURMERIC

**GLP-1 AGONIST MEDICATIONS: 1) For patients on daily dosing, hold GLP-1 agonists on the day of the procedure. 2) For patients on weekly dosing, hold GLP-1 agonists a week prior to the day of the procedure. If patient has no GI symptoms on the day of the procedure and the GLP-1 agonist was held as advised, proceed as usual.**

- DULAGLUTIDE (Trulicity)
- EXENATIDE (Bydureon)
- LIRAGLUTIDE (Victoza)
- LIXISENDATIDE (Adlyxin)
- SEMAGLUTIDE (Ozempic, Wegovy, Rybelsus)

**COUMADIN AND ANTICOAGULANT AGENTS: Discuss with your surgeon. Unless surgeon states otherwise, patients should stop taking one week before surgery.**

- AGGRASTAT (Tirofiban)

- ASPIRIN, AGGRENOX (in combination with DIPYRIDAMOLE) - (Acetylsalicylic Acid)
- COUMADIN (Warfarin)
- HEPARIN
- INNOHEP (Tinzaparin)
- INTEGRILIN (Eptifibatide)
- PERSANTINE, AGGRENOX (in combination with ASPIRIN) - (Dipyridamole)
- PLAVIX (Clopidogrel)
- PLETAL (Cilostazol)
- REOPRO (Abciximab)
- TICLID (Ticlopidine)
- TRENTAL (Pentoxifylline)

**NONSTEROIDAL ANTI-INFLAMMATORY DRUGS: Discuss with your surgeon.**

- ANAPROX, NAPROSYN, ALEVE (Naproxen)
- ANSAID, FROBEN (Flurbiprofen)
- ARTHROTEC (Diclofenac, Misoprostol)
- BEXTRA (Valdecoxib)
- CELEBREX (Celecoxib)
- CLINORIL (Sulindac)
- DAYPRO (Oxaprozin)
- DOLOBID (Diflunisal)
- FELDENE, FEXICAM (Piroxicam)
- INDOCIN, INDOCID (Indomethacin)
- LODINE, ULTRADOL (Etodolac)
- MECLOMEN (Meclofenamate)
- MOBIC (Meloxicam)
- MOTRIN, NUPRIN, ADVIL, IBU-TAB, RUFEN, SALETO, PEDIAPROFEN (Ibuprofen)
- NALFON (Fenoprofen)
- ORUDIS, ORUVAIL, ORAFEN (Ketoprofen)
- RELAFEN (Nabumetone)
- TOLECTIN (Tolmetin)
- TORADOL (Ketorolac)
- VIOXX (Rofecoxib)

**PRESCRIPTION DRUGS CONTAINING ASPIRIN OR SALICYLATES: Discuss with your surgeon.**

- DARVON COMPOUND (Propoxyphene Hydrochloride)
- DISALCID (Salsalate)
- EASPRIN (Aspirin)
- EMPIRIN WITH CODEINE (Aspirin and Codeine)
- EQUAGESIC TABS (Meprobamate and Aspirin)
- FIORINAL (Aspirin, Butalbital, Caffeine)
- MAGSAL
- NORGESIC (Orphenadrine Citrate)
- PERCODAN (Oxycodone and Aspirin)
- ROBAXISAL (Methocarbamol and Aspirin)
- SOMA COMPOUND (Carisoprodol and Aspirin)
- SYNALGOS-DC CAPS (Drocode Bitartrate, Aspirin, Caffeine)
- TALWIN (Pentazocine, Naloxone, Hydrochloride)
- TRILISATE (Choline Magnesium Trisalicylate)
- ZORPRIN (Aspirin)

**NONPRESCRIPTION DRUGS CONTAINING ASPIRIN OR SALICYLATES: Discuss with your surgeon.**

- ALKA-SELTZER ANTACID & PAIN RELIEVER EFFERVESCENT TABLETS
- ALKA-SELTZER PLUS COLD MEDICINE TABLETS
- ANACIN
- ANTHROPAN LIQUID
- ARTHRITIS STRENGTH BUFFERIN
- ASCRIPTIN
- ASPERGUM
- CAMA ARTHRITIS PAIN TABLETS
- CAMA TABLETS
- DASIN TABLETS
- DOAN'S PILLS
- DURADYNE TABLETS
- ECOTRIN
- EMPIRIN
- EXCEDRIN

- GOODY'S HEADACHE POWDER
- MOBIGESIC TABS
- MOMENTUM TABS
- PEPTO-BISMOL
- TRIGESIC
- VANQUISH CAPLETS

#### ORAL HYPOGLYCEMICS:

- If patient is on METFORMIN (Glucophage) they should NOT TAKE it night BEFORE surgery and ON day of surgery.
- If patient is on any other hypoglycemic, they should NOT TAKE them on the MORNING of surgery.

#### INSULIN:

- All insulin preparations take usual dosages for the entire day preceding the day of surgery.
- Discontinue all regular insulin ON the day of surgery.
- Type 2 diabetics should NOT take any type of insulin on day of surgery.
- Type 1 diabetics should NOT take insulin on the day of surgery. A blood sugar will be obtained on arrival to the hospital and addressed on an insulin sliding scale.
- Patients with an insulin pump should only CONTINUE their basal rate.

#### MAO INHIBITORS (Monoamine Oxidase): STOP taking them 2 WEEKS before surgery.

- ISOCARBOXAZID (Marplan)
- PHENELZINE (Nardil)
- SELEGILINE (Emsam)
- TRANYLCPROMINE (Parnate)

#### SEIZURE MEDICATIONS: Take ON the day of surgery.

- CARBAMAZEPINE (Tegretol)
- GABAPENTIN (Neurontin)
- LAMOTRIGINE (Lamictal)
- LEVETIRACETAM (Keppra, Spritam)
- OXCARBAZEPINE (Trileptal)
- PHENOBARBITAL (Solfoton)
- PHENYTOIN (Dilantin)
- TOPIRAMATE (Topamax)

- VALPROIC ACID DERIVATIVES
- ZONISAMIDE (Zonegran)

#### **OPIOID ANTAGONISTS & OPIOID PARTIAL AGONISTS:**

- 1) STOP 72 hours prior to elective surgery if practical; discuss with provider:
  - BUNAVAIL (Buprenorphine/Naloxone)
  - NALTREXONE
  - SUBOXONE SL (Buprenorphine/Naloxone)
  - ZUBSOLV SL (Buprenorphine/Naloxone)
- 2) DO NOT STOP:
  - SUBUTEX SL (Buprenorphine)

**For patients who did not follow the premedication recommendations as listed, the risks of delaying the procedure versus continuing with the planned procedure should be discussed with the proceduralist/surgeon and be decided on as a risks/benefit analysis considering the procedure, the urgency of the procedure, the severity of risks to benefits, and the patient's wishes.**