



# Preoperative Anesthesia Reviews

AN OVERVIEW



**First Hill**  
SURGERY CENTER

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# THE REVIEW PROCESS

- The surgeon enters the order into EPIC or completes the FHSC scheduling request form [<http://firsthillsurgerycenter.com/sites/default/files/FHSC-Case-Request-Fax-Form-Interactive%20or11.pdf>]; determines that an anesthesia review is required and provides the reason for review.

**ANESTHESIA REVIEW FIELD ON THE FHSC SCHEDULING REQUEST FORM**

Latex Allergy:	<input type="checkbox"/> YES / <input type="checkbox"/> NO
Anesthesia Review Required:	<input type="checkbox"/> Yes / <input type="checkbox"/> No    If Yes, Why?:
Interpreter:	<input type="checkbox"/> Yes <input type="checkbox"/> No    If yes, what Language:

- The office sends a staff message in EPIC to the surgery scheduler and submits scheduling form (if applicable) noting whether patients medical record is in EPIC or located elsewhere.
- Surgery scheduler sends an EPIC staff message to the pre-admissions nurse with AR request.
- A pre-admission Anesthesiologist reviews the patients chart and completes an anesthesia summary note in Epic. PAC nurses notes can be found in the Notes section under PreOp Note. The Anesthesia note will indicate if the patient is cleared, not cleared or needs further workup for surgery at FHSC.

# INDICATION FOR ANESTHESIA REVIEW

- **H&P** – must be available to do chart review.
- **BMI** – Any patient with a BMI greater than 45 (patients weighing more than 350 pounds are not suitable for surgery at FHSC).
- **Sleep apnea** – Any patient with a history of severe OSA or OSA without CPAP use.
- **Cardiac** – Any patient with a history of any type of cardiac issue  
[[see evaluation form for patients with CIED](#)]
- **Kidney Failure** – Any patient with a history of acute/chronic renal failure, transplant, dialysis, GFR less than 40. Need dialysis day before surgery and potassium day of surgery.
- **Other** – Any patient with multiple co-morbidities or any medical issues of uncertainty. If unsure, please submit for anesthesia review and allow the PAC team to make the decision. Please call with any questions.

**Pre-admission clinic – 206.320.7751**

**Fax – 206.720.7766**

**FHSC reception – 206.320.7750**

# INDICATION FOR ANESTHESIA WITH SCHEDULING FORM FOR REVIEW

- **BMI** - Accurately determined BMI
- **Sleep apnea** - Most recent sleep study report and CPAP use or OAD  
- Most recent progress note from sleep study MD or clinic
- **Cardiac** - EKG within last 6 months if history of cardiac disease or arrhythmia  
- Most recent progress note from cardiologist  
- Echo if available  
- Pacemaker interrogation report within 12 months including magnet mode information [[see evaluation form for patients with CIED](#)]  
- Recent PT/INR results (if anti-coagulated)
- **Kidney Failure** - Most recent progress note from nephrologist  
- Current dialysis schedule and date of last dialysis  
- Most recent K and Creatinine results  
- GFR < 40
- **Chronic Pain** - Known narcotic tolerance and/or known use of opioid agonist
- **Other** - Any progress note or labs pertaining to issue of concern

**We request that all required information be submitted at least 5 days before surgery. If it is not submitted surgery may need to be rescheduled.**

# PRE-OPERATIVE TESTING GUIDELINES

## Pre-Operative Testing Guidelines

Pre-Anesthesia tests performed within 6 months of surgery are acceptable for assessments unless significant abnormalities are present and/or the patient's medical condition has changed during the interval between the laboratory testing date and the date of surgery. Pre-Anesthesia Nurses will inform the surgeon's office that pre-operative testing is needed, the office will coordinate with the patient to complete testing. If the office is unable to obtain preoperative testing the Pre-Anesthesia Nurse will put an order in EPIC.

	Potassium (K+) 6 months	EKG 6 months	INR (within 2 days of surgery)	Blood Glucose (upon admission)	Nasal Swab (Negative)	Dialysis
Diuretics	<b>X</b>					
Digoxin use	<b>X</b>					
Renal Insufficiency/ Failure	Date of surgery					24 hours prior to surgery
History of CAD or Arrhythmias		<b>X</b>				
Coumadin			<b>X</b>			
Diabetes				<b>X</b>		
MDRO within 1 year					<b>X*</b>	
COVID-19 test within 72 hours					<b>X</b>	

\*If nasal swab is not negative, patient will be placed in contact precautions.

# CLOSING THE LOOP

## **Once the anesthesia review has been completed:**

- Anesthesia PAC Note can be found in the NOTE section under Anesthesiology Pre-Admission Clinic in EPIC. Anesthesia Summary Note can be found in the NOTE category of the PreAdmit Clinic section in EPIC.
- If the patient is approved for surgery at FHSC, the surgeon's office will not be contacted and the surgery will proceed as scheduled.
- If the patient is not approved for surgery at FHSC, the PreAdmission RN will contact the surgeon's office by email and let them know why.
- If the patient needs further workup as indicated by anesthesia, the PreAdmission RN will contact the surgeon's office. The surgeon's office is responsible for facilitating the necessary tests/labs before the surgery.

**All required information should be submitted at least 5 days before surgery.**

**If it is not submitted, surgery may need to be rescheduled.**