

Required for all High Risk Cases

Procedure based indications - (Cardiothoracic, intracranial, major orthopedic-spinal reconstruction, major reconstruction of the G.I. tract, major vascular, major genitourinary tract procedure(RRP))

Highly invasive procedure, Poss. EBL> 1500cc, typically intermediate or long duration

	ECG	CBC	BMP	PT PTT	LFT	Mg	Transf. + Alb	U/A	U HCG	CXR	T&S	Other	A.M. Labs
High Risk		X	X										
Any procedure with insertion of hardware or foreign material/graft								X				Urine Cx	

Add the Following for Disease Based Indications

So all high risk procedures get at least CBC and BMP as above

Disease-based Indications													
	ECG	CBC	BMP	PT PTT	LFT	Mg	Transf. + Alb	U/A	U HCG	CXR	T&S	Other available	A.M. Labs
Female of child-bearing age									X				
Age > 65yrs													
Asthma / COPD													
Bleeding disorder (hemophilia, VwD, ITP)				X								Eval by hematologist	
Cardiovascular, Vascular or Valvular Disease	X												
Coumadin (warfarin)				X*									possible a.m. PT
Diabetes	X												a.m. accucheck
Diuretics (lasix, hydrochlorothiazide etc.)													
Hypertension	X												
Heart Failure (CHF)	X					X						Assesment of EF or cardiac consult	
Liver disease, cirrhosis, EtOH abuse	X					X							
Plavix (clopidogrel)													
Pulmonary HTN, Cardiac Valvular dx, congenital hx disease	X											Echo, cath or cardiac consult	
Renal Insufficiency or Failure	X												a.m. K+
Stroke	X												
Thyroid disease												TSH	
Unplanned Significant Weight loss				X		X	X						
Obstructive Sleep Apnea	X											room air SAO2 if <91 cardiac eval or echo	
BMI > 40	X											room air SAO2 if <91 cardiac eval or echo	
Hx of Gastric Bypass				X		X							
Over 40 and Poor work tolerance < 4 mets	X												
Over 60 and Poor work tolerance < 7mets	X												

ECG within last 12 months is acceptable assuming clinically stable.

For a stable medical condition lab values are relevant for 3 months or since last significant medical event (e.g. missed dialysis, recent initiation of diuretic therapy, abnormal bleeding) whichever is less.

These are guidelines only. Clinical judgement and extreme situations may require more or less testing

* PT or INR alone sufficient for coumadin



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