**Suggested Pre-Op Testing Decision Aid for Low-Risk Surgeries**

**\*American Society of Anesthesiologist (ASA) Physical Status Classification System:**

**ASA Class I:** Normal healthy patient. Non-smoking, no or minimal alcohol use, no acute or chronic disease, normal BMI.

**ASA Class II:** Mild systemic disease without substantive functional limitations. Current smoker, obesity (30<BMI<40), well-controlled DM/HTN, mild lung disease.

**ASA Class III:** Severe Systemic disease with substantive functional limitations, poorly controlled DM/HTN, COPD, morbid obesity (BMI ≥ 40), active hepatitis, alcohol dependence or abuse, pacemaker, moderate reduced EF, ESRD on HD, prior MI, CVA, TIA, or CAD/stents.

**For the following low-risk surgeries…**

* Breast lumpectomy
* Laparoscopic cholecystectomy
* Hernia repair

**Refer to Suggested Pre-Op Test Chart**

No

No

Is the patient’s only comorbidity stable, asymptomatic cardiac disease (e.g., CAD, valvular disease)?

Is the patient ASA Class I or II\*?

Yes

Yes

\*\*May consider EKG if none available within the past ~6 months

**No preoperative**

**testing indicated\*\***

**No preoperative**

**testing indicated**

**Suggested Pre-Op Tests for Patients Undergoing Low-Risk Surgery Who Are ASA III or Above**

***This chart does not replace clinical judgment and is intended as guidance only***

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
|  | CBC |  T&S | BMP | LFTs | INR/PT/PTT | EKG | CXR |
| **History of anemia, thrombocytopenia** |   |   |   |   |   |   |   |
| **Cardiovascular disease** |   |   |   |   |   |   |   |
| **Anticoagulant use or history of bleeding disorder** |   |   |   |   |   |   |   |
| **DM/major endocrine disease, prior electrolyte abnormalities, use of diuretics, antiarrhythmics, ACE/ARB** |   |   |   |   |   |   |   |
| **Kidney disease** |  |  |  |  |  |  |  |
| **Liver disease or risk of malnutrition** |   |   |   |   |   |   |   |
| **Age≥70, peripheral/cerebral vascular disease, cardiac risk factors, new cardiac symptoms** |   |   |   |   |   |   |   |
| **Existing cardiopulmonary disease (without CXR in past 6 mo), poor exercise tolerance (<4 metabolic equivalents), thoracic surgery** |   |  CBC: Complete blood countT&S: Type and screenBMP: Basic metabolic panel |   |   |   |   |   |

LFTs: Liver function tests

INR: International normalized ratio

PT: Prothrombin time

ACE: Angiotensin-converting enzyme inhibitors

ARB: Angiotensin receptor blocker

PTT: Partial thromboplastic time

EKG: Electrocardiogram

CXR: Chest radiography

**References:**

* Mocon A, McRitchie D, Tharani A. *Drop the Pre-Op: A toolkit for reducing unnecessary visits and investigations in pre-operative clinics.* Ontario, CA. 2019.
* Chow, W. B., Rosenthal, R. A., Merkow, R. P., Ko, C. Y., & Esnaola, N. F. (2012). Optimal preoperative assessment of the geriatric surgical patient: a best practices guideline from the American College of Surgeons National Surgical Quality Improvement Program and the American Geriatrics Society. *Journal of the American College of Surgeons*, *215*(4), 453-466.
* National Guideline Centre (UK). Preoperative Tests (Update): Routine Preoperative Tests for Elective Surgery. London: National Institute for Health and Care Excellence (NICE); 2016 Apr. (NICE Guideline, No. 45.) Acknowledgements.