



**PRE-OPERATIVE HISTORY & PHYSICAL GUIDELINES**

Please have your physician fax this completed History and Physical form to 651-259-2569. We would ask that you keep a copy for yourself to bring in the day of the surgery.

NAME					DIET MEDS/HERBALS/VITAMINS	<input type="checkbox"/> YES	<input type="checkbox"/> NO	
DATE					ASPIRIN USE?	<input type="checkbox"/> YES	<input type="checkbox"/> NO	
DOB	BP	P	HEIGHT	WEIGHT	ANESTHESIA COMPLICATIONS?	<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input type="checkbox"/> FAMILY HX
					BLEEDING TENDENCIES?	<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input type="checkbox"/> FAMILY HX
					MAO INHIBITORS	<input type="checkbox"/> YES	<input type="checkbox"/> NO	
					DRUGS / ALCOHOL	<input type="checkbox"/> YES	<input type="checkbox"/> NO	

ALLERGIES / DRUG OR LATEX SENSITIVE?	<b>LABORATORY</b>		
	HGB	K+	OTHER

PRESENT MEDICATIONS? (TO INCLUDE OVER THE COUNTER MEDS, HERBAL SUPPLEMENTS & VITAMINS)	EKG	<input type="checkbox"/> YES	<input type="checkbox"/> NO	CHEST X-RAY	<input type="checkbox"/> YES	<input type="checkbox"/> NO
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PHYSICAL			
	WNL	ABNL	EXPLANATION
HEENT			
HEART			
LUNGS			
SMOKER			HOW LONG?
GI			
GU			
BACK / EXTR.			
NEURO			
GYN / BREAST			
SKIN			

SIGNIFICANT MEDICAL HISTORY / PREVIOUS SURGERY / HOSPITALIZATIONS	PHYSICIAN SIGNATURE
INDICATIONS FOR SURGERY / PROCEDURE PLANNED	PRINT NAME
SPECIAL EQUIPMENT / INSTR. NEEDS	

CLEARED FOR SURGERY AT HIGH POINTE AMBULATORY SURGERY CENTER  YES  NO

**HIGH POINTE AMBULATORY SURGERY CENTER GUIDELINES**

• ASA I AND II • ASA III AT THE DISCRETION OF MDA

**ANESTHESIA ADMISSION GUIDELINES:**

- A. The following patients will **NOT** be admitted:
1. Patients under 6 months of gestational age.
  2. Patients with known active infectious diseases.
  3. Diagnosed pt/ immediate family history of malignant hyperthermia (MH).
  4. Patients requiring intraoperative heparin infusion.
  5. Patients who've had a MI in the last 6 months.
  6. Patients who are pregnant.
- B. The following patients will be admitted upon approval of the anesthesiologist (MDA).
1. Patients diagnosed with sleep apnea.
  2. Patients with MI history, daily/frequent angina, and/or CVA.
  3. Patients greater than age 70 with cardiac history other than hypertension.
  4. Patients on Coumadin are to have stable clotting values completed within 1-5 days of their scheduled surgery date.
  5. Patient on continuous oxygen.
  6. Patients with history of bypass surgery less than one year.
  7. Patients who weigh greater than 300 pounds with a BMI > 45 or = 45.

**GENERAL GUIDELINES**

- A. History and Physical completed within 30 days of the scheduled procedure.  
 B. EKG/ECG to be completed and on the following pts. medical record  
 EKG completed within 6mths:
1. Pts. age 60 and over.
  2. Pts. with stable cardiac history (ie: Congestive Heart Failure, Coronary Artery Disease, treated hypertension)
- EKG completed within 1mth:
1. Pts. with active cardiac history and daily angina.
- C. Laboratory testing:
1. Potassium (K): Patients who are taking medications in the following categories are to have a "K" completed before admission to the surgery center:
    - Diuretics/antihypertensives that alter potassium, potassium supplements, digitalis preparations and long term steroid use.
    - IF the dosages of the medications in the above listed categories have **NOT** been changed significantly within the previous 60 days, a potassium level will be acceptable if drawn within 30 days of the scheduled surgery date.
  2. Glucose:
    - A. Patients with Diabetes Type I and Type II will have a blood sugar performed preoperatively.
    - B. Patients with diabetes who are taking insulin will have a blood sugar/glucometer reading performed postoperatively in Ph 1. The result will be known prior to transfer to the Phase II area.
    - C. Patients on oral hypoglycemics will have a repeat glucometer reading Phase I postoperatively if their preoperative blood sugar was <100 or >225.
  3. Oral Anticoagulants:
    - A. Patients on oral anticoagulants (Panwarfin/Coumadin) will have Protime (PT/INR) drawn preoperatively within 24-72 hours.
    - B. Pts. that have discontinued their anticoagulants more than 5 days, a normal PT/INR within 3-5 days is acceptable.
  4. Hemoglobin:
    - A. Females with a history of menses within last 6 months are to have a documented hemoglobin.
  5. Pregnancy:
    - A. Women of childbearing age are to have a documented pregnancy test if possibility of pregnancy exists.

**MEDICATIONS**

- All blood pressure, anticonvulsants, antiulcer & heart medications should be taken with one sip of water the morning of surgery.
- Discontinue anticoagulants, nonsteroidal anti-inflammatories, herbal remedies & appetite suppressants seven days before surgery.
- DIABETICS = Per primary physician or 1/2 normal AM dose.