

Always refer to local guidelines / discuss with **SENIOR** as exact rules can vary between trusts and type of operation

## BLOODS

**Ensure patient has up to date blood results:**

- < 1 week if elective and no significant co-morbidities / anticoagulation
- < 24 hours if significant non-elective / co-morbidities / anticoagulation

**Usual Bloods:**

- FBC
- U&E
- LFT
- Bone profile
- Clotting / INR
- Group & Save

**Additional Bloods:**

- Thyroid function:
  - Known thyroid disease

If blood test results are abnormal discuss with Senior regarding any intervention required / further testing

In particular - **abnormal clotting / INR > 1.4** - discuss with Senior / Haematology regarding any intervention / further testing

## OTHER INVESTIGATIONS

**Usual Investigations:**

- ECG
- CXR

**Additional Investigations:**

- Echo:
  - Heart failure / Murmur / Valvular disease
- Spirometry:
  - Significant lung disease
- Pacemaker check

**Women of child bearing age:**

- Pregnancy test

## MEDICATIONS

### MEDICATIONS TO TAKE

- **Cardiac / Hypertensive medications:**
  - Except ACE-I / ARB / Diuretics
- **Thyroid medications**
- **Immunosuppressants**
- **Epilepsy medications**
- **Parkinson's medications**
- **Inhalers**
- **Eye Drops**
- **Anti-Psychotics**
- **Anti-Depressants**
- **Tranquilisers:**
  - If taken regularly - not PRN
  - However best to discuss with Senior / Anaesthetist

**Long term Steroids:**

- May require increased dose
- Discuss with **Senior** or **Anaesthetist**

### MEDICATIONS TO CONSIDER HOLDING

**Anti-coagulation (Warfarin / NOAC):**

- See local trust policy - discuss with Haematology regarding when to stop, if reversal agents needed or whether LWMH / Unfractionated Heparin infusion cover is required

**Insulin:**

- Hold morning of surgery
  - Use Sliding Scale Insulin

**Oral hypoglycaemics:**

- Hold on day of surgery
  - Use Sliding Scale Insulin if poor glycaemic control

**Anti-platelet:**

- Hold 7 days prior to surgery

**Diuretics:**

- Hold on day of surgery

**ACE-I / ARB:**

- Hold on day of surgery

**If unsure always discuss with Senior or Anaesthetist**

## NIL BY MOUTH

**6 to 2 Hours Pre-op:**

- Clear fluids only

**2 Hours Pre-op:**

- Nil by mouth

**Time of surgery:**

- Unless known, ensure patient is ready for 8am:
  - 2am-6am: Clear Fluids
  - 6am onwards: NBM

Some trusts use Pre-operative nutritional supplements (i.e Carbohydrate drink) 2-3 hours prior to surgery

**Always consults local guidelines**

**IV Fluids:**

- Do not routinely prescribe for NBM unless prolonged period
- Assess whether patient requires fluids (examples):
  - Fluid deplete
  - CKD / AKI
  - Requires sliding scale insulin