
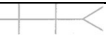


Name, MRN
Procedure
date

Surgical Planning & Safety Guide

MEDVAMC Vascular Surgery

| | what | when (relative to surgery date) | req. by | who |
|--------------------------|---|--|----------|--|
| <input type="checkbox"/> | x-ray at level of planned amputation (indication: eval. for orthopedic hardware) | within past 6 months | team | anyone undergoing above-ankle leg amputation |
| <input type="checkbox"/> | pacemaker nurse evaluation note | within past 6 months | hospital | anyone with pacemaker, defibrillator or other implanted cardiac device (ICD) |
| <input type="checkbox"/> | complete blood count (CBC)  | within past 90 days | hospital | everyone |
| <input type="checkbox"/> | basic metabolic profile (BMP)  | within past 90 days | hospital | everyone |
| <input type="checkbox"/> | PT/INR, PTT | within past 90 days | hospital | everyone |
| <input type="checkbox"/> | type & screen | within past 90 days | hospital | everyone |
| <input type="checkbox"/> | 12-lead ECG | within past 90 days | hospital | everyone |
| <input type="checkbox"/> | chest x-ray | within past 90 days | hospital | everyone |
| <input type="checkbox"/> | foot x-ray | within past 90 days | team | anyone undergoing foot procedures |
| <input type="checkbox"/> | iMed consent with review of any previous life-sustaining treatment documentation ¹ | within 60 days | hospital | everyone |
| <input type="checkbox"/> | OCL template history and physical (H&P) | within 30 days | hospital | everyone |
| <input type="checkbox"/> | anesthesiology clinic evaluation | within 30 days | hospital | all outpatients |
| <input type="checkbox"/> | vascular medicine evaluation | within 30 days | team | selected patients ² |
| <input type="checkbox"/> | staff pre-operative note | within 30 days | hospital | everyone |
| <input type="checkbox"/> | peri-op management plan for antiplatelet & anticoagulant medications ³ | >7 days prior to surgery | team | everyone |
| <input type="checkbox"/> | OR schedule posting ⁴ | 2+ business days on ORC, otherwise paper | hospital | everyone |
| <input type="checkbox"/> | COVID nasal swab ⁵ | within 1-2 business days | hospital | everyone |
| <input type="checkbox"/> | type & cross order ±specimen | within 48 hours of surgery | team | selected; see below ⁵ |
| <input type="checkbox"/> | OCL H&P update | within 24 hours of surgery | hospital | everyone |
| <input type="checkbox"/> | site marking by surgeon or involved trainee | day of surgery | hospital | everyone |

1. Standard elements: include ALL faculty (Barshes, Choi, Hansraj, Kougiass). Use search function to add all planned and possible procedures, matching to OR posting as much as possible.

2. Discuss with involved faculty. In general, dialysis access and venous procedure patients rarely/never need vascular medicine evaluation; open aortic cases, fenestrated EVAR cases virtually always need vascular medicine evaluation. Use clinical judgement in other situations.

3. Always continue daily aspirin. Discuss other agents. Most helpful for this discussion are: (a) when and why the medication was initiated (esp. drug-eluting coronary stents); (b) procedure being done.

4. Best practices for OR posting: avoid all abbreviations, especially for laterality. Best done by staff surgeon or by trainee involved in the case. Only post if procedure and timing have been discussed with staff surgeon. Do not use any CPT codes that begin with the number 7 (36247 instead for angiogram possible angioplasty/stenting).

5. The required timeline for COVID testing has changed several times since the onset of the pandemic; check for updates. Mon. surgery = Friday test, Tues. surgery = Monday test, Wed. surgery = Mon/Tues test, Thurs. surgery = Tues/Wed test, Friday surgery = Wed/Thurs. Test.

6. Cannot be written before patient is physically in the hospital and seen by one of our team members.

7. Our services RBC requirements (since 2014):

4 units pRBCs for open aortic operations and fenestrated EVARs (fEVARs) .

2 units pRBCs for typical / off-the-shelf (i.e. non-fenestrated) EVARs, carotid endarterectomies (CEAs), carotid stenting , open femoral reconstructions (endarterectomy/patch), fem-anything bypass, iliac angioplasty/stenting, above-ankle amputations (transfemoral or above-knee amputations [AKA], transtibial or below-knee amputations [BKAs], through-knee amputations).

type and screen only for everything else, including: infrainguinal angiogram/angioplasty/stenting, arteriovenous fistulas (AVFs) or grafts (AVGs) for dialysis access; any foot operations; any other soft tissue procedure, saphenous vein ablation.

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