

# Optimising patients pre-surgery

Ulf Lindsten MD

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# Content

- Assessment
- ASA-classification
- Preoperative preparations
- Premedication

# Assessment

- History:
  - 1) Medical history
  - 2) Anesthetic history
  - 3) Drug history
  - 4) Family history
- Physical examination
- Special investigations

# History

## Medical history

- Coexisting medical diseases must be identified
- ”Most relevant” tend to be:
- Respiratory (A + B)
  - cardiovascular disease (C)
  - Allergy

# History

## **Anesthetic history**

- Previous anesthetic records
- Difficult intubation
- Postoperative pain
- Sore throat, headache or PONV

# History

## **Drug history**

- Antihypertensives?
- Insulin?
- Diuretics?
- Asthma medication
- Antibiotics
- In general. Keep the medication!

# History

## **Family history**

- Malignant hyperthermia

# History

- Alcohol
- Smoking



# Physical examination

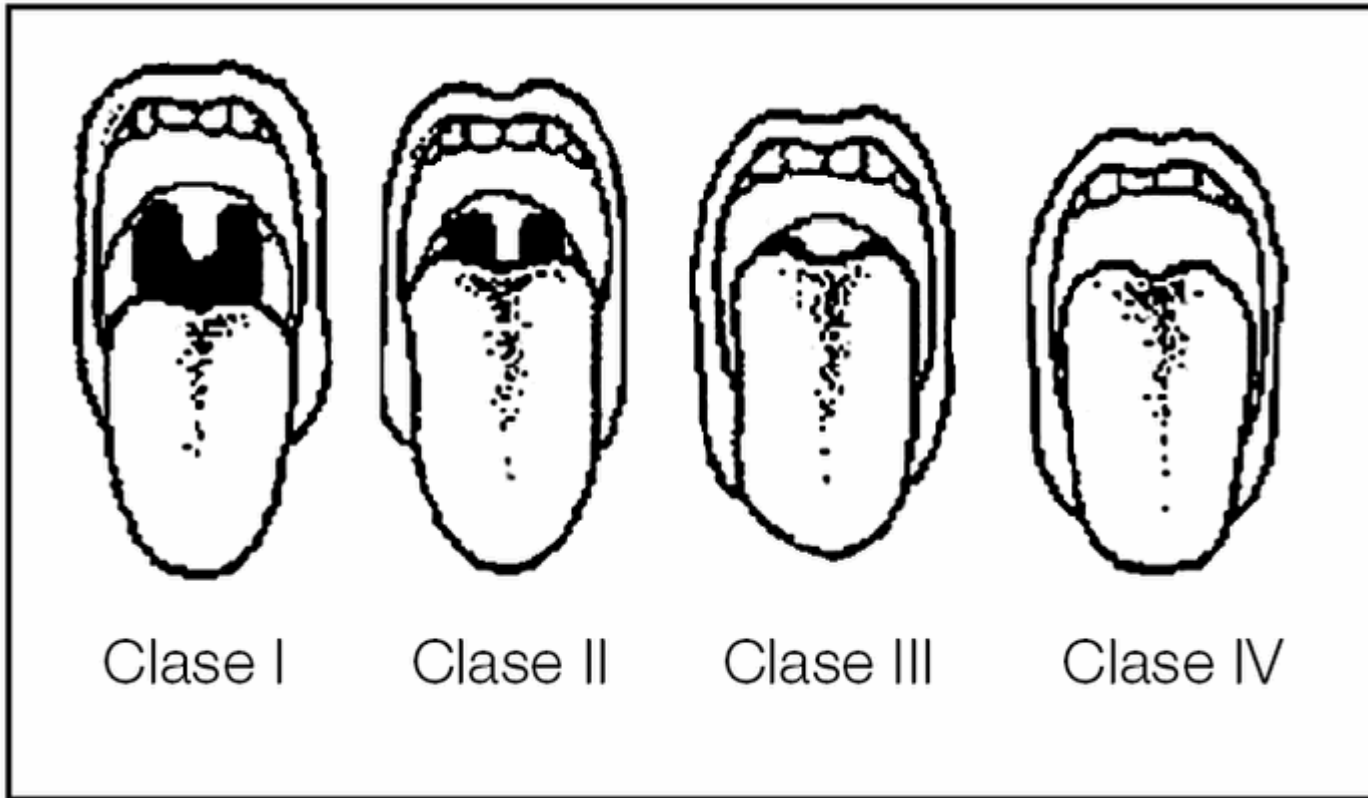
- Goal: to be performed on every patient admitted for surgery
- General
- Cardiovascular
- Respiratory
- Airways
- Nervous
- Young and healthy?

# Airways

Assess airway:

- Mouth opening, dentition
- Mallampati
- Temporomandibular joint mobility
- Neck mobility
- Short neck?
- Small mandible?
- Weight

# Airway Mallampati



# Special investigations

- Depends on the facilities that are available

Two questions:

- 1) Will the investigation give information not revealed by clinical assessment?
- 2) Will the results alter the management of the patient?

# Safety first!

Two Questions:

- 1) Optimal physical condition?
- 2) Benefit from surgery – risk with anesthesia?

# ASA-classification

- 1) A normal healthy patient
- 2) A patient with mild systemic diseases
- 3) A patient with severe systemic disease
- 4) A patient with severe systemic disease that is a constant threat to life
- 5) A moribund patient who is not expected to survive without the operation
- 6) A declared brain-dead patient whose organs are being removed for donor purposes.

# Preoperative preparations, General

- Preoperative fasting
- Consent
- Information/questions?

# Preoperative preparation, specific

## **Anemia**

- Investigated before treatment
- If iron deficiency
- Acceptable Hb? Ideally  $> 10$  g/dl



# Preoperative preparation, specific



# Preoperative preparation, specific



# Preoperative preparation, specific

## **Fluid Imbalance**

- Multiple causes
- Symptomes
- Appropriate fluid

# Preoperative preparation, specific

## **Electrolyte imbalance**

- Sodium and Potassium, especially, should be corrected
- High - low

# Preoperative preparation, specific

## **Cardiovascular**

- Myocardial infarction
- Cardiac failure
- Arrhythmias
- Hypertension

# Preoperative preparation, specific

## **Respiratory disease**

- Acute respiratory disease – no ane
- Chronic respiratory disease, COAD
- Asthma

# Preoperative preparation, specific

## **Metabolic disease**

- Diabetes mellitus
- Liver disease, INR, Hepatitis – postponed op six month
- Thyroid disease - corrected

# Health declaration?

- No objections = ASA 1 – Directly to op.
- Minor problems = assessment by nurse
- Significant problems = assessment by anesthesiologist
- Future – preop clinic



The end