

## PRE SURGICAL TESTING REQUIREMENTS

### HISTORY AND PHYSICAL

All Patients Within 30 days of surgery

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### EKG

Any patient with Diabetes, Hypertension, Cardiac, Vascular, Pulmonary, Renal, or Hepatic Disease

All Men > 45 years old

All Women > 55 years old

Within 3 months of surgery

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### CHEST X-RAY

Not required

### LABORATORY WORK

Within 30 days of surgery

|  | <u>General Anesthesia</u> | <u>MAC</u>         | <u>Anterior Segment Surgery under MAC only</u> |
|--|---------------------------|--------------------|--|
| Healthy Patient  | none                      | none               | none   |
| Diabetes<br>Hypertension<br>Cardiac/Pulmonary<br>Renal | BMP                       | BMP                | none   |
| Liver disease  | CBC, BMP<br>PT/PTT, LFT   | CBC, BMP<br>PT/PTT | none   |
| Coumadin therapy                                       | INR                       | INR                | none   |

For history of anemia or for surgeries where blood loss is expected to be >200cc, please include CBC

For patients on kidney dialysis, K+ should be obtained day of surgery

All diabetic patients glucose levels (i.e. finger stick) to be checked day of surgery

Urine pregnancy day of admission for all women of menstruating age

For patients with AICDs, please see NYEE's policy concerning defibrillators

**Patients with more complex medical conditions may require further workup (i.e stress tests, echocardiogram, cardio/pulmonary consult, etc). Please consult anesthesia department or patient's PMD.**

Cataract Surgery under MAC does not require an EKG if there are no coexisting diseases, regardless of age.

CBC = complete blood count, BMP = basic metabolic profile, LFT = liver ftinction test, K+ = potassium

PT/PTT/INR = prothrombin time/partial prothrombin time/international normalized ratio

AICD = internal cardiac defibrillator



**ADMITTING NOTE & PRE-SURGICAL ORDERS**

PATIENT: \_\_\_\_\_

D.O.B: \_\_\_\_\_

DATE OF ADMISSION: \_\_\_\_\_

PHYSICIAN: \_\_\_\_\_

**ADMITTING DIAGNOSIS:** \_\_\_\_\_

**ADMITTING NOTE:** (Admitting note contains sufficient information that include patient age, sex, initial assessment, reason for surgery or admission any significant history or consultative findings, any special measures or precautions planned for the patient during care or treatment and the anticipated complications, if any)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**TESTS DONE & RESULTS:**

OPHTHALMOLOGY

| OTOLARYNGOLOGY

Visual Acuity OD \_\_\_\_\_ OS \_\_\_\_\_ Audiogram \_\_\_\_\_  
Tension OD \_\_\_\_\_ OS \_\_\_\_\_ Chest X-Ray \_\_\_\_\_  
Fields \_\_\_\_\_ CT Scan \_\_\_\_\_  
Slit Lamp \_\_\_\_\_ MRI \_\_\_\_\_  
Fundoscopy \_\_\_\_\_ Other \_\_\_\_\_

**ALLERGIES:**

\_\_\_\_\_

**ADMISSION and PRE-SURGICAL ORDERS:**

**AMBULATORY**

**INPATIENT**

**MEDICAL CONSULT/CLEARANCE:**  Outside Physician  Med/Ped Consult Dr. \_\_\_\_\_

**PROCEDURE (TREATMENT):** \_\_\_\_\_

**ANESTHESIA:**  General  MAC  Local

**DIET:**  Standard NPO Orders  Other \_\_\_\_\_

**ADULT STANDARD DILATION:** | OD  OS  X1  X2  X3  
**PEDIATRIC STANDARD DILATION ORDER SET:**

**OTHER ORDERS:** \_\_\_\_\_

**LABS** (Note to all physicians, if lab work was done at an outside facility, results must be received by NYEEI 48 hrs. prior to admission)

**No New Lab Orders - Tests not performed at NYEEI**

**Healthy Patient Protocol**

**Standard Lab Orders for Patient Who Has other Medical Conditions** (please indicate the appropriate test panel order below)

| **DIABETES MELLITUS**

**HYPERTENSION**

**CARDIOVASCULAR/PULMONARY**

**HEPATIC**

**EXPECTED BLOOD LOSS>200cc**

**RENAL**

(See reverse side for guidelines regarding pre-operative orders and labs testing panels)

**MD (print):** \_\_\_\_\_

**Signature:** \_\_\_\_\_ **Date/Time:** \_\_\_\_\_