



December 14, 2016

To Whom It May Concern:

Due to the requests of several surgeons the scope of the Anesthesia Protocol has come into question. Upon review new items such as patient medications have been added and testing parameters were discussed.

The following medications will be addressed if the protocol is ordered.

- Blood Pressure Medications—Withhold ACE inhibitors (ACE-I) and angiotensin receptor blockers (ARB) only if taking other anti-hypertensive medications. Clonidin—take as normal.
- Beta-blockers—All Beta-blockers will be order per SCIP initiative.
- Blood Thinners—The physician who ordered the medication should provide instructions for patient.
- Pain Medication—Use as normal unless cannot tolerate on empty stomach.
- Diabetic Medications—Hold oral doses. Cut standard a.m. insulin dosage in half. If patient has insulin pump, leave alone.
- Seizure/Myasthenia Gravis/Parkinson Medications—Take as normal.
- Thyroid Medications—Take as normal.
- Proton Pump Inhibitors—Take as normal.
- Birth Control—Take as normal.

Recurrent issues:

Pregnancy—The OB/GYN physician of the pregnant patient needs to have privileges at HMC and be consulted prior to surgery. If OB/GYN is not privileged at HMC, other arrangements should be made prior to day of surgery.

Clearance—All documentation clearing patient for surgery (i.e. cardiac clearance/PCP clearance) must be signed by a physician and must be within 30 days of surgery date.

Non-Blood loss procedures—Must be declared in orders and would omit hematocrit drawn prior to surgery.

The process to enact the Anesthesia Protocol:

CMS requires that the use of a protocol must be initiated with an order. To utilize the above medication instructions and or anesthesia testing (see attached) the surgeon must order anesthesia protocol. The use of the anesthesia protocol is optional, but opting not to use it requires orders for proper instructions regarding medications and or testing.