ANESTHESIA DEPARTMENT GUIDELINES FOR MidWest Eye Center

- 1. PREFER NPO after midnight for all AM cases.
- 2. Clear Liquids allowed up to 3 HOURS PRIOR TO SURGERY for late in day surgery cases; no more than 8 ounces.
 - No Solids after Midnight
 - See CLEAR LIQUID LIST
- 3. FOR DIABETICS

Use Glucose Monitor For Baseline At Home On AM Of Surgery:

- Call Surgery Center If High, Above 250
- Call Surgery Center If Low, Below 100

 Anesthesiologist will make determination as to how to proceed.
- 4. If a patient is a Heart or Lung Transplant Patients clearance for surgery at the Surgery Center will be subject to approval by Anesthesia Department.

 Anesthesia must be consulted prior to scheduling patient.
- 5. Any patient with severe Angina or a patient that has had a Myocardial Infarction Within 6 Months Prior To The Surgery, cannot be done at the Surgery Center
- 6. Pregnancy Test to be done on all Menstruating Females that have not had a Tubal Ligation.
- 7. Patients having topical anesthesia should NOT discontinue their blood thinning medications. All other patients should ask their family doctor and/or Cardiologist and Ophthalmologist for instructions regarding blood thinning medications.
- 8. A Hemogram is to be done on patients with anemia and those on hemodialysis.
- Basic Metabolic Prof (electrolytes, bun, creatinine and glucose) not necessary on patients who are cleared by their family doctor and are medically stable. These and any other blood tests should be done at the discretion of the family doctor.
- 10. History & Physicals should be performed on all patients within 28 days prior to the surgery. (If the patient has a similar procedure and it is performed within 28-30 days of the first procedure, and the patient's health is unchanged, the history and physical by the family physician will be good for 60 days.
- 11. No patients over 400 pounds. There may be specific patients that require review due to Body Mass Index.