## HIGH DESERT HEALTH SYSTEM AMBULATORY SURGICAL CENTER

SUBJECT: II-126 PROCEDURES OR CONDITIONS NOT ACCEPTABLE BY ANESTHESIA FOR OUTPATIENT SURGERY	POLICY #: 1067 VERSION: 2
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DATE APPROVED: 09/12/2017	

**PURPOSE:** To identify patients who are not suitable candidates for and/or procedures that should not be performed at an ambulatory surgery care center setting.

## POLICY:

The following procedures, conditions or patients are not acceptable for anesthesia at the Ambulatory Surgical Center and will not be scheduled for outpatient surgery:

- 1. Procedures with anticipated need for transfusion.
- 2. Considerable/significant postoperative pain that would/could not be controlled by oral medications is anticipated.
- 3. Patient is ASA IV (P4).
- 4. Patients with history of prior myocardial infarction within less than six months.
- 5. Patients with Angina Pectoris class IV (symptoms with daily activities or present at rest)
- 6. Patients with congestive heart failure Class III (symptoms with mild activity) or IV (symptoms at rest).
- 7. Children under the age of 2 years.
- 8. Children who have broncho-pulmonary dysplasia, anemia, significant systemic disorders or chronic diseases.
- 9. Children with a history of extreme prematurity.
- 10. Patients with permanent pacemakers or implanted defibrillators (AICD).

## **RESPONSIBILITY**:

- 1. It is the responsibility of the attending physician to correctly evaluate the patient and the procedure pre-operatively for suitability for outpatient surgery.
- 2. It is the responsibility of the anesthesiologist/CRNA to ensure patient suitability for the outpatient surgery. If, after preoperative evaluation by the

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anesthesiologist/CRNA, it is determined by the anesthesiologist that the patient is not a suitable candidate for outpatient surgery, then the anesthesiologist will:

- Inform the surgeon
- Inform the patient, family and the Ambulatory Surgery Center scheduling clerk of the need to cancel the procedure.
- Request the Preop Clinic Nurse to schedule the patient for an appointment with the assigned primary care provider or, if there is no assigned primary care provider, with the attending surgeon, if further work up and/or medical stabilization is indicated/ warranted.
- 3. It is the responsibility of the attending physician, anesthesiologist, the CRNA and the nurse, caring for the patient, to evaluate each patient's condition preoperatively on the day of procedure for possible change in patient's condition, which may require cancellation of the outpatient procedure.

Original Date: 07/01/2003	3	
Reviewed: 09/12/2017		
Next Review Date: 09/12	/2018	
Previous Review Dates:	08/02/11; 06/09/13	
Previous Revise Dates:	11/26/03; 01/12/09; 02/11/09; 08/03/11; 10/31/11; 06/18/13	