Preoperative Care

Adrian P. Ireland
South Infirmary-Victoria University Hospital

Why is it important?

- Regular job for the intern
- Important job for;
  - The intern
  - Team
  - Patient
  - Everyone!

Outline

- Documentation
- Consent
- Drugs
- Allergies
- Correct side and site
- Preoperative checklist
- Optomisation of co-morbidities
- Anaesthetic requirements
- Surgical requirements
- Prophylaxis

Documentation

- Clinical notes
  - Ensure patient is identified
  - Date and time and who you are representing
  - Legibility of notes, avoid ambiguous shorthand
  - Signature, with name in block capitals and bleep number underneath
- Consent
  - Also note what was discussed in the clinical notes

If only you had told me doctor
I never would have had the operation

Consent

- Risks / Benefits and Alternatives
- See documentation regarding legibility
- Risks
  - For any operation
    - Death, drug reactions, bleeding, infection, scar
    - Urinary retention, Deep venous thrombosis, Pulmonary embolism
  - From this operation
    - Varicose veins ; Cutaneous nerve injury, recurrence, chronic pain, limb swelling
    - Groin Hernia; Urinary retention, recurrence, pain at site, testicular atrophy

Drugs

- Stop
- Continue
- Make anaesthetic team aware
- Particular drugs
  - Anticoagulants
    - Aspirin, Clopidrogel, Warfarin, Heparin
  - Procoagulants
    - Oral contraceptive pill, ? HRT
- Allergies
  - When and what happened?

Marking the side and site

- Need to avoid removing the wrong organ or limb!
- Mark the side on the patient
  - Front, Back and Lateral (What position will the patient be in?)
- Mark the site on the patient (eg a circle)
- Indicate the side on the consent form (USE LEFT OR RIGHT AND NEVER L OR R)
- Indicate the side in the clinical notes

Pre operative checklist

- Aviation industry, Military approach
- Boring but less liable to error, Interns do not like it
- Example
  - Documentation of the procedure in the clinical notes
  - Consent
  - Drugs check
  - Prophylaxis check DVT and antibiotic
  - Bowel preparation for certain operations
  - Results of relevant investigations in notes
  - Theatre and anaesthesia informed
  - ICU/ HDU bed booked

Optomisation of co-morbidities

- Paramedical staff
  - Physiotherapy, Occuputational therapy, Clinical nutritionist, Rehabilitation physician
- Nebulisers for asthma, obstructive pulmonary disease
- Stabalisation of hypertension, diabetes
- Rehydration
- ? Significant Ischaemic heart disease, Renal failure, etc
- Requires multidisiplinary input

Anaesthetic requirements

- Age and sex and history and clinical examination
  - FBC
  - U&E
  - CXR
  - ECG
  - Sickle cell screen

Surgical requirements

- Keep anaesthesia happy or they will cancel the operation
- FBC
- U&E
- ECG
- CXR
- Group and Hold or Group and Cross Match
- Results of relevant investigations

Ordering a test

- Order it
- Make sure it is done
- Make sure the laboratory receive it
- Make sure you get the result
- Make sure you act on the result

Prophylaxis

- Deep venous thrombosis
  - Hydration
  - Mobilisation
  - Subcutaneous heparin
  - TEDs
- Antibiotic
  - Usually at induction of anaesthesia