

Anesthesiology Recommendations For Elective Procedures

(Surgery, Imaging Scans And Dental Cases)



Children's
of Alabama®

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For urgent or emergent procedures or immunocompromised patients, consult an Anesthesiologist.

RECENT ILLNESS [bronchitis, covid-19, croup, flu, pneumonia, or RSV]

- For patients diagnosed with bronchitis, covid-19, croup, flu, pneumonia, or RSV, elective procedures may be scheduled 4-7 weeks after diagnosis and the patient must be symptom free for at least 4 weeks. This includes asymptomatic patients flagged positive during multi-panel screen testing.

RECENT ILLNESS [mild URI or sinus infection]

- For patients diagnosed with a mild upper respiratory infection (URI) or sinus infection, elective procedures may be scheduled 2 weeks after diagnosis and the patient must be symptom-free for at least 1-2 weeks.

RECENT ILLNESS [GI virus]

- For patients diagnosed with a gastrointestinal (GI) virus, elective procedures may be scheduled 1 week after diagnosis and the patient must be symptom-free for at least 48 hours. The patient should also be back to eating and drinking normally.

IMMUNIZATIONS

- Patients should not receive immunizations within 2 days of surgery to allow time for vaccine-related reactions to occur and resolve.

LABS DRAWN UNDER GENERAL ANESTHESIA

- Labs (ex: genetic testing, allergy testing [RAST/food], etc.) will NOT be obtained under general anesthesia unless the lab is pertinent to the scheduled surgery, diagnostic procedure, or the anesthesia plan of care.

HOME MEDICATIONS

- Patients may take most of their normal medications the morning of surgery with a few sips of clear liquids or a small amount of light-colored Jell-O.
- Clear liquid examples: water, apple juice, tea, clear sodas (Sprite, ginger ale, 7 UP, etc.), yellow or green gelatin (Jell-O, etc.) and light-colored sports drinks (Gatorade, Powerade, Pedialyte, etc.). No red, purple, orange, or blue liquids.
- Do not take medications with pudding, yogurt, or apple sauce. No protein drinks, milk products or thickening powders.
- Inhalers and nebulizer treatments are OK.
- Stop herbal products, nutritional supplements, and alternative medications 1-2 weeks before surgery.
- Do not take vitamins or wear essential oils the morning of surgery.
- If the patient takes insulin, medication to control blood sugar, DDAVP, factor to control bleeding, daily aspirin, blood thinners or steroids, contact the patient's specialist who prescribes the medication. The medication may need to be adjusted before and immediately following surgery.

...continued on reverse

DO NOT TAKE THE FOLLOWING MEDICATIONS ON THE DAY OF SURGERY:

- Angiotensin Converting Enzyme (ACE) Inhibitors-used for high blood pressure
(Do not take after 7pm the night before surgery.)
EX: ACE inhibitors: Captopril, Lisinopril, Enalapril, or other meds ending with “-pril”.
- Angiotensin Receptor Blockers (ARBs)-used for high blood pressure
(Do not take after 7pm the night before surgery.)
EX: ARBs: Losartan, Valsartan and other meds ending with “-sartan”.
- Metformin- should be held for 24 hours before surgery.
(Do not take the day prior to surgery or the day of surgery.)

HOLDING MEDICATIONS FOR WEIGHT LOSS OR TYPE 2 DIABETES:

EX: Semaglutide (Ozempic, Wegovy, Rybelsus), Dulaglutide (Trulicity) and other Glucagon-Like Peptide-1 (GLP-1) Receptor Agonists

- Do not take on the day of surgery for patients who take the medication daily.
- Do not take starting 7 days prior to surgery for patients who take medication weekly.
- Consult the patient’s Endocrinologist for guidance in patients taking medication for diabetes management to help control their condition and prevent hyperglycemia (high blood sugar).