

**COASTAL ANESTHESIOLOGY MEDICAL ASSOCIATES**  
**Competent, Compassionate, Consistent and Comprehensive Anesthetic Care**

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Disclaimer

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## PRE-OPERATIVE MEDICATION GUIDELINES

### CONTINUE

ALL medications should be continued, including morning doses the day of surgery with a sip of water upon rising, unless explicitly addressed below.

**BETA-BLOCKERS:** There is some evidence that patients taking beta-blockers can reduce their peri-operative cardiovascular risk by continuing these medications through the peri-operative period. Therefore it is very important that these patients continue their medication.

### HOLD (DISCONTINUE)

This limited list of medications (see detailed list at end of document) should be held for one dose prior to surgery, either the night before or the day of surgery depending on the dosing schedule.

**ANTIHYPERTENSIVES, *Hold only these classes the last dose prior to surgery***

- Angiotensin Converting Enzyme Inhibitors (ACE inhibitors)
- Angiotensin Receptor Blockers (ARBs)

**ANTIDIABETIC AGENTS, *Hold as indicated***

- Oral Antidiabetic Agents, hold night before or day of surgery
- Injectible Antidiabetic Agents, hold day of surgery
- Intermediate and long-acting (basal) insulin, reduce dose by 50% the day of surgery
- Short and rapid-acting insulin, hold day of surgery

**ALL HERBAL AND DIETARY SUPPLEMENTS, *Hold 2 weeks prior to surgery***  
**EVALUATE**

These medication classes have been shown to affect peri-operative risk. However, it is beyond the scope of our practice to make specific recommendations for these medications. We recommend they be evaluated to determine the risk versus benefit of holding them during the peri-operative period.

**PATIENTS WITH CORONARY ARTERY STENTS WHO ARE ON PLAVIX**

*Patients who are on Plavix and have had a stent placed within 12 months should have cardiology consultations to evaluate whether the Plavix should be discontinued for the surgery.*

**ANTICOAGULANTS**

*The risk of a cardiovascular and/or thromboembolic events must be weighed against the risk of bleeding for a specific patient and procedure. These are general guidelines.*

- Warfarin (Coumadin), hold 5 days prior to surgery. Order PT(INR) on admission
- Heparin, hold 4 hours prior to surgery
- Low Molecular Weight Heparin, hold 24 hours prior to surgery.
- Factor XA Inhibitor, hold 4 days prior to surgery
- Direct Thrombin Inhibitors: Argatroban, hold 4 hours prior to surgery;  
Bivalirudin (Angiomax), hold 2 hours prior to surgery

**ANTIPLATELET AGENTS**

*The risk of a cardiovascular and/or thromboembolic events must be weighed against the risk of bleeding for a specific patient and procedure. These are general guidelines.*

- Aspirin, hold 7 days prior to surgery
- Clopidogrel (Plavix), hold 7 days prior to surgery
- Prasugrel (Effient), hold 7 days prior to surgery
- Ticlopidine (Ticlid), hold 10-14 days prior to surgery
- Cilostazol (Pletal), hold 4 days prior to surgery
- GPIIb/IIIa Inhibitors: Abciximab (Reopro), hold 36-48 hours prior to surgery;  
Eptifibatide (Integrilin), hold 4-6 hours prior to surgery

**ANALGESICS**

*These are general guidelines.*

- Short-acting NSAIDs, hold day prior to surgery
- Long-acting NSAIDs, hold 3 or more days prior to surgery

**MONOAMINE OXIDASE INHIBITORS (MAOIs)**

*Patients on this class of antidepressants have an increased risk of drug interactions with peri-operative medications putting them at risk of a hypertensive crisis. These patients should consult with their prescribing physician to consider tapering off these medications two weeks prior to surgery and switching to an alternate class of antidepressants.*

- Phenelzine (Nardil)
- Tranylcypromaine (Parnate)
- Isocarboxazid (Marplan)
- Selegiline (Emsam)

### HOLD MEDICATION LIST

Therapeutic Class	Medication	When to Hold	Reason
<b>Antihypertensives</b>			
ACE Inhibitors	Captopril (Capoten) Enalapril (Vasotec) Lisinopril (Zestril) Ramipril (Atlace) Benazepril (Lotensin) Quinapril (Accupril) Fosinopril (Monopril) Moexipril (Univase) Perindopril (Aceon) Trandolapril (Mavik)	Last dose prior to surgery	Hypotension during surgery
Angiotensin Receptor Blockers (ARBs)	Losartan (Cozaar) Irbesartan (Avapro) Valsartan (Diovan) Telmisartan (Micardis) Olmasartan (Benicar) Candesartan (Atacand)	Last dose prior to surgery	Hypotension during surgery
<b>Antidiabetic Agents</b>			
Oral Antidiabetic agents	Acarbose (Precose) Glipizide (Glucotrol) Glyburide (Micronase, Diabeta) Glimepiride (Amarly) Metformin (Glucophage) Miglitol (Glyset) Nateglinide (Starlix) Pioglitazone (Actos) Repaglinide (Prandin) Rosiglitazone (Avandia) Sitagliptin (Januvia) Saxagliptin (Onglyza)	Last dose prior to surgery	Hypoglycemia risk
Injectable Antidiabetic Agents	Exenatide (Byetta) Pramlintide (Symlin)	Day of surgery	Hypoglycemia risk
Intermediate and long acting (basal) insulin	NPH insulin Glargine (Lantus) Detemir (Levemir)	Reduce dose by 50% day of surgery	Hypoglycemia risk
Short and rapid-acting Insulin	Regular insulin Insulin aspart Lispro	Day of surgery	Hypoglycemia risk