

Pre-Op Bronchoscopy Check List

Name: _____ JHH # _____ DOB: _____ / _____ / _____

Procedure: _____ Indications: _____

Medications are in EPR Yes No- List Medications below (if not in EPR):

Healthy (ASA 1 and 2, irrespective of age) patients scheduled ONLY for screening diagnostic procedures do not require EKG, CXR, or lab data. H&P taken day of procedure will suffice. See below for patients with ASA classification 3 or 4

EKG (within the past 12 months)

Patients with any of the following:

- Hypertension
- Angina or myocardial infarction
- History of MI, cardiac procedures, stentings, ablation, in last 3 years
- Implantable devices (unless interrogated with/in 3 mos. for ICD and 6 mos. for Pacemaker)
- Exercise intolerance (<2 flights of stairs)
- Peripheral vascular disease
- Diabetes mellitus > 20 yrs duration
- Morbid obesity BMI >35.5
- Documented sleep apnea
- History of TIA or CVA

EKG's available in EPR Yes No

EKG ordered? Yes No

Cardiac Evaluation (within the past 12 months)

Patients with any of the following:

- History of MI, cardiac procedures, stentings, ablation, in last 3 years
- Ventricular Assist Device (VAD)
- Pulmonary HTN not followed by Pulmonary
- Pacemaker (Interrogated w/in 6 months)
- ICD (Interrogated w/in 3 months.)
- Unstable Dysrhythmias
- Symptomatic Congestive heart failure (CHF)
- Recent EKG changes (Development of a new bundle branch block, &/or changes consistent with a recent MI, &/or reversible ischemia)

Cardiac evaluation available Yes No

ECHO and/or stress test available in EPR Yes No

Cardiac evaluation from cardiologist or PEC ordered Yes No

Chest x-ray, Chest CT, or PFTs (within the past 6 months)

Patients with any of the following:

- Unstable reactive airway disease or asthma
- History of congestive heart failure
- Unstable or Advanced COPD: (Home O2, exercise intolerant, PND)

Chest X-Ray, PFT, chest CT w/in 6 months available Yes No

Chest X-Ray, PFT, chest CT ordered Yes No

Electrolytes, Bun/Cr, Basic Metabolic Panel (within the past 6 months)

Patients with any of the following:

- Loop diuretic therapy (e.g. bumex, furosemide)
- Patients with history of creatinine >2.0 or a change from baseline with/in past 6 mo. of 1.5 or greater
- Patients on peritoneal or hemo dialysis (labs within 2 days)
- Chemotherapy (Cisplatinum, Adriamycin, Vincristine) within 6 months
- Decompensated Liver Failure (acute or chronic)

Electrolytes etc. in EPR Yes No

Electrolytes etc. ordered Yes No

INR (within 48 hours)

Patients with any of the following:

- Decompensated liver disease
- Personal or family history of blood dyscrasias
- Chronic coagulopathy
- Chronic biliary obstruction
- Systemic anti-coagulation

INR needed Yes No

INR >3.5 to be discussed with providers Yes No

Physician Name _____ # _____ Date: _____