Pre-Op Bronchoscopy Checklist Instructions

Pre-Anesthetic Algorithm for Bronchoscopy

Physicians are to fill out the pre-Op Bronchoscopy Checklist for all patients scheduled for bronchoscopy. See guidelines and exceptions below.

- **Fill out (or use a patient sticker) the patient information**
- **List medications if not in EPR**
- **Review the categories (EKG, Cardiac, Chest, & Electrolytes) with the patient or using a recent H&P**
- **Indicate yes or no for all italicized questions and sign bottom of form**
- **Write the necessary orders**
- **Hand the filled out form and orders to your MOC or clinic coordinator**
- **MOC's and Clinic Coordinators should set up any appts. necessary to obtain indicated test results and scan the completed list into EPR along with the test results 4 days prior to the appointment**

Guidelines and Exceptions:

- **Healthy (ASA 1 and 2, irrespective of age) patients scheduled ONLY for screening / diagnostic bronchoscopy do not require EKG, CXR, or lab data. H&P taken day of procedure will suffice.**

- **Patients should have History and Physical within 6 months.**
  - ***Exception: "Frequent Flyer" patients (with 2 JHH visits within the past 12 months) and an H&P > 6 months require an Unstructured Note in EPR updating the medical history or stating a stable systems review (i.e. cardiac, respiratory, renal, hepatic).***

- **Patients with certain medical conditions (as determined by checklist) may require labs, EKG, and/or cardiac clearance.**

- **Patients with complex medical conditions or ASA 3 or greater may be evaluated in the Preoperative Evaluation Center (PEC). Call 410-955-4722 to schedule an appointment (need 4 days lead time).**

- **Patients with newly diagnosed HTN or Labile HTN should be controlled on medication at least 7 days prior to procedures.**

Questions concerning patient exceptions should be directed to the Endoscopy Care Coordinator, Chris Smith, via email at clsmith@jhmi.edu.

ASA Score:

1 Healthy patient with no disease outside of the surgical process
2 Mild to moderate systemic disease caused by the surgical condition or by other pathological processes, medically well-controlled
3 Severe disease process which limits activity but is not incapacitating
4 Severe incapacitating disease process that is a constant threat to life
5 Moribund patient not expected to survive 24 hours with or without an operation
E Suffix to indicate emergency surgery for any class