

PREOP CONTINUATION OF MEDICATIONS – continue **all** meds except:

ANTICOAGULANTS (including aspirin): Instructions on holding anticoagulants need to come from the prescriber, the surgeon, or a consultant

NSAIDs: Hold for 4 days (unless otherwise instructed by the surgeon)

INSULINS: Continue as normal until the morning of procedure:

- If BG > 140, take one-half of AM dose of long-acting insulins (LANTUS, LEVEMIR, TOUJEO, TRESIBA)
- Pumps – suggest decreasing the basal rate by one-half (patient may override this instruction)
- Hold all other insulins

ORAL DIABETIC MEDS:

- Hold the DOS
- Hold SGLT2 inhibitors for 72 hrs in diabetics for major surgery other than total joint
- Note: SGLT2 inhibitors to be continued DOS in non-diabetics

INJECTABLE GLP1As: For those on once daily dosing, just hold the day of surgery. For those on weekly dosing:

- Hold for 7 days for minor cases
- Hold for 7 days if the indication is solely for weight loss
- Continue the regular dosing schedule for intermediate and major surgery, and no solids the day before surgery
- Continue the regular dosing schedule for colonoscopies

DIURETICS: Hold the day of surgery if no history of HF

BIOLOGICS (REMICADE, HUMIRA, ENBREL, ORENCIA, etc.): The timing of intermediate and major surgery should be delayed until one week has passed after the most recent dose. No such delay required for minor surgery

OTCs:

- Ideally hold all herbal meds for 7 days (will not cancel case if this is not possible)
- Ideally hold vitamin E supplements for 7 days (will not cancel case if this is not possible; vitamin in a multivitamin form can be continued through day prior to surgery)
- Cannabis in all forms – Do not consume two hours before arrival

Type-A MAO Inhibitors for Depression: Hold for 7 days, but only under psychiatric supervision

NARCOTIC ANTAGONISTS:

- Includes all forms of buprenorphine, naloxone, and naltrexone
- Continue DOS for minor and intermediate surgery, otherwise consult anesthesia for instructions