Adult Pre-Operative Medication

Sometimes it’s really important to continue routine medication pre-operatively; at other times it’s important to omit it. If in doubt please, please ask the team (surgeons and anaesthetists) and in general follow the guidelines below.

For medications not on this list, please refer to the BSUH – Adult Perioperative Medicines Management Guide on Microguide.

**NBM DOES NOT MEAN NO MEDICATION!**

Medication can be administered any time prior to surgery BUT max 20ml of water in the 2 hours prior to surgery.

Please ALWAYS give these drugs pre-op, with a sip of water, unless otherwise instructed by a doctor/prescriber:

**Antibiotics**
**Anti-epileptics**
**Anti-psychotics**
**Anti-angina medications† such as:**
  - Nifedipine
  - Isosorbide mononitrate

**Anti-hypertensives† (except ACEIs/ARBs)**
**B-blockers† such as:**
  - Atenolol
  - Bisoprolol

**Diuretics† such as:**
  - Bendroflumethiazide
  - Furosemide
  - Spironolactone

† if blood pressure (or heart rate for Beta-blockers) is out of range please seek advice before giving

**Immuno-suppressants** (especially for patients with transplants) such as:
  - Mycophenolate
  - Tacrolimus
  - Ciclosporin

**Long and Intermediate Acting Insulins**† such as:

*Reduce dose by 20% if on VRII*
  - Lantus
  - Levemir
  - Humulin I
  - Toujeo
  - Tresiba
  - Insuman Basal
  - Abasaglar
  - Insulatard

**Parkinson’s Drugs** (ensure to give them on time, and consider NG route (or switching to a patch) such as:
  - Co-careldopa
  - Rotigotine
  - Entacapone
  - Co-beneldopa
  - Rasagiline

**Proton pump inhibitors (+ other anti-acid drugs)**
  - Lansoprazole
  - Omeprazole

**Analgesics** (except NSAIDS) such as:
  - Paracetamol
  - Gabapentin/Pregabalin
  - Opioids

**Statins**
**Steroids** - refer to BSUH ‘Peri-operative management of patients taking corticosteroids’ guideline on Microguide

The following drugs require special consideration pre-operatively and on the day of surgery.

**ACE Inhibitors** such as:
  - Ramipril
  - Lisinopril
  - Perindopril
  - Captopril

**Angiotensin II Receptor Blockers** such as:
  - Candesartan
  - Losartan

**Anticoagulants / anti-platelet therapy**
- please refer to BSUH ‘Perioperative Bridging’ guideline [MM0021]
- Consult with surgical team
Risk stratified according to:
  - Operative bleeding risk
  - Patient thrombotic risk

**Non-steroidal Anti-inflammatory Drugs**
In General continue treatment BUT
- Omit for 48 hours if having neuro or spinal surgery.
If in doubt confirm with surgical team.

**Oral / injectable hypoglycaemic drugs**
- please refer to BSUH ‘Perioperative Diabetes Management’ guideline

Additional information can be obtained from:
- BSUH - Perioperative Medicines Management Guide
- https://www.ukcpa-periophandbook.co.uk/