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Pre-Surgery Medication Instructions

Blood Pressure Medications:

For <u>Hip Replacement Patients</u>: You should <u>not</u> take the scheduled dose of the following blood pressure medications before surgery (either the night before surgery or the morning of surgery) unless instructed otherwise by the anesthesiologist or surgeon.

Please hold:

- ACE Inhibitors: (for example: Benazepril, Captopril. Enalapril, Lisinopril, Quinapril, Ramipril)
- ARB: (for example: Atacand, Avapro, Micardis, Diovan, Cozaar, Benicar)
- **Diuretics**: (for example: hydrochlorothiazide, chlorthalidone, spironolactone, amiloride, triamterene, bemetanide, furosemide, torsemide, metolazone, or any combination medications including a diuretic).

For <u>Knee Replacement Patients</u>: Please continue to take your scheduled doses of blood pressure medications prior to surgery (both the night before and the morning of surgery) unless instructed otherwise by the anesthesiologist or surgeon.

 Please hold any diuretics: For example: hydrochlorothiazide, chlorthalidone, spironolactone, amiloride, triamterene, bemetanide, furosemide, torsemide, metolazone, etc. If you take a combination blood pressure medication with a diuretic, please take as you normally would prior to surgery.

You will get a phone call from your anesthesiologist the night before surgery and you can review your medications with them if you have any questions!

For <u>ALL</u> Total Joint Replacement Patients: Please follow the below guidelines

Heart Medications and Beta Blockers:

The morning of surgery you *should* take your heart medicines and medications for arrhythmias. For example: Digoxin, Amiodarone, Diltiazem AND take Beta-blockers, which may include: Coreg (carvedilol), Toprol (metoprolol), Tenormin (atenolol), Inderal (propranolol) and others as prescribed by your physician.

Also take Statins (usually taken at night) including i.e. Lipitor (atorvastatin), Zocor (simvastatin) *If you take your beta blocker in the evening, be sure to take it the night before surgery.

[These instructions provided by the Oregon Surgical Institute Medical Directors]

Insulin/Diabetic Medications:

The goal is to have a blood sugar between 100-200 upon arrival at OSI. We want to avoid big swings in your blood sugar. If you are unsure that this will work for you, please discuss with your anesthesiologist the night before surgery.

Morning Procedures

- If you are Insulin Dependent you should take 50% of your long-acting dose of Insulin. No short acting insulin pre-procedure.
- Oral Diabetic medications should **not** be taken the morning of surgery.

Afternoon Procedures

- If you are Insulin Dependent you should take 50% of your long-acting dose of Insulin in the morning. No short acting insulin pre-procedure
- Oral Diabetic medications should be taken the morning of surgery.

Remember: If you feel that you have a low blood sugar level during the fasting period, take a glucose pill or drink clear liquid juices up to 4 hours before admission; for example: apple, grape, or cranberry. No pulp juices for example orange juice and no solid food.

Diabetic/weight loss drugs (Ozempic, Trulicity, Mounjaro) Injectables need to be stopped 7 days prior to surgery. Oral forms of these drugs need to be stopped 1 day prior to surgery.

Blood Thinning Medications:

Unless specifically ordered by your physician you will need to stop taking blood thinner. Inform your admitting nurse if you have taken blood-thinning medications within the last month prior to surgery.

If you take blood thinners, please:

- Stop Lovenox (Enoxaparin) 1 day prior to surgery
- Stop Eliquis (Apixaban) 3 days prior to surgery
- Stop Xarelto (Rivaroxiban) 3 days prior to surgery
- Stop Coumadin (Warfarin) 5 days prior to surgery
- Stop Plavix (Clopidogrel) 7 days prior to surgery
- Stop Pradaxa (Dabigatran) -7 days prior to surgery

In addition, some of the more common drugs to stop <u>7 days prior to surgery</u> are **Aspirin**, Anacin, and **Nonsteroidal Anti-Inflammatory Drugs (NSAIDs)** such as Advil, Motrin, Excedrin, Ibuprofen, Aleve, Medipren, Midol-200, Naprosyn, Toradol, Diclofenac, Celebrex, and Meloxicam.

Other Medications to Stop Before Surgery:

- **Erectile Dysfunction Medications:** Any medications used for erectile dysfunction (Viagra, Cialis, Levitra, etc.) need to be stopped 4 days prior to surgery.
- Opioid Antagonists: Suboxone and Naltrexone need to be stopped at least 7 days before surgery.
- **Vitamins and Supplements:** Vitamins, supplements and herbal medications need to be stopped 7 days before surgery.
- **Sympathomimetic Amines:** Phentermine needs to be stopped at least 14 days before surgery.

If you have any questions regarding these instructions, you can call an OSI pre-op nurse at 971-708-0400.