**Introduction:**
Preoperative anesthesia assessment or consultation may be required prior to an operative procedure to ensure optimal patient preparation. Patients may be referred to the anesthesia consult clinic by a physician or by a nurse following a pre-surgical screening assessment. Indications for a preoperative anesthesia consult include the presence of significant medical problems, the nature of the proposed diagnostic or therapeutic procedure, or a patient request for a visit with an anesthesiologist.

**Policy:**
The Queen’s University Department of Anesthesiology recommends that patients with the following conditions be referred for a preoperative evaluation by an anesthesiologist in the Pre-Surgical Screening Unit:

1. **Request for consultation:**
   1.1. Patient requests a consultation to discuss anesthetic care
   1.2. Surgeon requests consultation for patient to discuss anesthetic technique or pain-management options

2. **Anesthesia considerations:**
   2.1. Personal history of anesthesia-related serious adverse event
   2.2. Personal or family history of malignant hyperthermia (not required if the patient has had a previous uncomplicated general anesthetic)
   2.3. Anticipated or past history of difficult intubation

3. **Surgical Procedures:**
   3.1. Major vascular, cardiac, or intrathoracic procedures
   3.2. Implantable cardiac defibrillator procedures

4. **Medical considerations:**
   4.1. General
      4.1.1. Poor functional capacity (unable to walk 1 block or climb one flight of stairs)
      4.1.2. Recent deterioration of chronic medical problem
      4.1.3. Unusual or complicated medical condition
   4.2. Cardiovascular
      4.2.1. Myocardial infarction or unstable angina within the last 6 months
      4.2.2. Structural heart disease (valvular, congenital, or transplant)
      4.2.3. Congestive heart failure within the last 6 months
      4.2.4. Implantable cardiac defibrillator in situ
   4.3. Respiratory
      4.3.1. Asthma or Obstructive lung disease requiring home oxygen or hospital admission within the past 6 months
      4.3.2. Untreated obstructive sleep apnea patients (including patients with symptoms who have not had a sleep study)
      4.3.3. Pulmonary hypertension
   4.4. Central Nervous System
      4.4.1. Neuromuscular disease (e.g., myasthenia gravis, muscular dystrophy)
      4.4.2. Quadriplegia
   4.5. Other
      4.5.1. Morbid obesity (body mass index > 40)
      4.5.2. Anemia (<100)
      4.5.3. Bleeding disorders (e.g., hemophilia, von Willebrand’s)
      4.5.4. Dialysis-dependent renal dysfunction
      4.5.5. Sickle Cell Disease