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The James



General Medicine Guidelines for Your Surgery - The James

Before your surgery, it is important to talk with your doctor, surgeon or nurse about all the medicines you take, including all the medicines ordered by any of your doctors, herbs, vitamins and over-the-counter medicines. This handout provides general guidelines about taking medicine before your surgery. Your doctor or a member of your health care team may give you more detailed instructions.

Important Medicine Information

Talk to your doctor about any medicines you take to thin your blood or prevent clots and any medicines from the list below. You may need to change these medicines or adjust the amount you take before surgery. The brand name of each medicine is listed in ().

These medicines include:

- aspirin
- NSAIDs such as ibuprofen (Advil, Motrin) or naproxen (Aleve)
- clopidogrel (Plavix)
- prasugrel (Effient)
- ticagrelor (Brilinta)
- warfarin (Coumadin)
- enoxaparin (Lovenox)
- dalteparin (Fragmin)
- fondaparinux (Arixtra)
- dabigatran (Pradaxa)
- apixaban (Eliquis)

This handout is for informational purposes only. Talk with your doctor or health care team if you have any questions about your care.

- rivaroxaban (Xarelto)
- edoxaban (Savaysa)
- betrixaban (Bevyxxa)
- cilostazol (Pletal)

If you have a stent, do not stop taking your medicines to prevent clots without first talking to the doctor who put in the stent or ordered this medicine for you. For more information, ask a member of your health care team for the patient education handout on protecting your stent.

If you take any anti-inflammatory or pain medicine, talk to your doctor about what medicine you can take before your surgery.

If your surgery or procedure is canceled for any reason, call your doctor because you may need to restart the medicines you take to thin your blood or prevent clots.

Talk to your doctor about all Monoamine oxidase inhibitors (MAOIs) that you take, such as phenelzine (Nardil), tranylcypromine (Parnate) and selegiline (Eldepryl). Your doctor may tell you to stop taking these medicines before your surgery.

Medicines You Should Not Take the Morning of Surgery

Do not take these medicines the morning of surgery, unless told otherwise by your doctor:

- Insulin or oral (taken by mouth) diabetes medicine
- Antacids, such as Maalox or Mylanta, or calcium carbonate (TUMS)
- ACE Inhibitors, such as lisinopril, enalapril, and ramipril
- ARBs, such as losartan, candesartan and valsartan
- Diuretics (water pills), such as furosemide and hydrochlorothiazide
- · Vasodilators, such as hydralazine and minoxidil
- Potassium
- Cholesterol medicines, such as cholestyramine (Locholest, Prevalite and Questran), colesevelam (WelChol), colestipol (Colestid), ezetimibe (Zetia) and gemfibrozil (Lopid). You can take statin medicines such as simvastatin, rosuvastatin and atorvastatin.

Medicines You Can Take the Morning of Surgery

You may take these medicines the morning of surgery with a sip of water:

- Acetaminophen (Tylenol)
- All blood pressure medicines, except the following:
 - ▶ **Do not take ACE inhibitors**, such as lisinopril, enalapril, and ramipril
 - ▶ **Do not take ARBs**, such as losartan, candesartan and valsartan
 - ▶ **Do not take diuretics** (water pills) such as furosemide and hydrochlorothiazide
 - ▶ **Do not take vasodilators**, such as hydralazine and minoxidil
- All breathing medicines, including inhalers
- All anti-seizure medicines
- All heartburn and gastric reflux medicine, except antacids such as Maalox or Mylanta or calcium carbonate (TUMS)
- Steroid medicines (or as directed by the doctor who ordered the medicine for you)
- Antidepressant medicines, unless told otherwise by your doctor
- Statin medicines for cholesterol, such as simvastin, rosuvastatin, and atorvastatin

Medicines You Must Stop Taking Before Surgery

Some medicines may need to be stopped within 2 weeks before your surgery. These medicines may include:

- warfarin (Coumadin) should be stopped _____ days before surgery (or as directed by the doctor who ordered the medicine for you).
- Metformin should be stopped 1 day before surgery.
- enoxaprin (Lovenox) should be stopped 1 day before surgery.
- theophylline (Elixophyllin, Theo-24, Theochron) should be stopped
 1 day before surgery (or as directed by the doctor who ordered the medicine for you).
- cilostazol (Pletal) should be stopped 2 days before surgery.

- apixaban (Eliquis) and rivaroxaban (Xarelto) should be stopped
 1 to 3 days before surgery (as directed by the doctor who ordered the medicine for you).
- NSAIDs, such as ibuprofen (Advil or Aleve) or naproxen (Aleve) should be stopped 5 days before surgery.
- dabigatran (Pradaxa) should be stopped 1 to 5 days before surgery (as directed by the doctor who ordered the medicine for you).
- aspirin with dipyridamole (Aggrenox) and clopidogrel (Plavix) should be stopped 3 to 7 days before surgery (as directed by the doctor who ordered the medicine for you).
- All herbal medicines should be stopped 14 days before surgery.
- Talk to your doctor about all Monoamine oxidase inhibitors (MAOIs)
 that you take, such as phenelzine (Nardil), tranylcypromine (Parnate)
 and selegiline (Eldepryl). Your doctor may tell you to stop taking these
 medicines before your surgery.

If you are taking a medicine that is not listed above, it is important to talk to the doctor who ordered the medicine for you and ask for instructions about what you should do before your surgery.

Other Information

- If you have diabetes, and were seen at the OSU Preoperative
 Assessment Center (OPAC), follow the instructions you were given at
 your appointment.
- If you have diabetes, and your blood sugar level is more than 200 mg/dL or less than 70 mg/dL on the morning of your surgery, call your surgeon's office.
- Your doctor, surgeon or nurse will give you more information about what you can eat and drink before surgery.
- **Do not** smoke after 6:00 p.m. the night before surgery.