

Plaza Surgery Center: Exclusion Criteria for Patient Selection

Purpose: To ensure patient safety and optimize surgical outcomes, the following criteria outline patient exclusion criteria that are **not** suitable for outpatient surgery at Plaza Surgery Center.

Patient Exclusion Criteria**1. Severe Cardiac Conditions**

- Recent myocardial infarction (within 3-6 months).
- Uncontrolled persistent hypertension (BP \geq 180/110 mmHg).
- Symptomatic congestive heart failure (NYHA Class III or IV) or ejection fraction \leq 35%.
- History of cardiac arrest or need for defibrillator within the past year.
- Unstable angina or symptomatic arrhythmias (uncontrolled atrial fibrillation)
- Significant valvular heart disease (e.g., severe aortic stenosis, severe mitral regurgitation)

2. Respiratory Compromise

- Severe chronic obstructive pulmonary disease (COPD) or asthma with frequent exacerbations (ACT Score $<$ 19)
- History of respiratory failure requiring hospitalization within past year
- Consistent need for home oxygen (does not include qhs CPAP/BiPAP)
- Untreated or severe obstructive sleep apnea (OSA) with a high risk for perioperative complications (non-compliant with CPAP, severe oxygen desaturation)

3. Neurologic Compromise:

- Poorly controlled epilepsy or seizures within past month without follow up neurology appointment.
- Recent stroke or transient ischemic attack (within past 6 months)

4. Metabolic Conditions

- BMI \geq 50 kg/m²
- Poorly controlled diabetes (e.g., HbA1c $>$ 9%, fasting glucose $>$ 250 mg/dL)

5. Renal and Hepatic Conditions

- Patients with ESRD who are noncompliant with their dialysis schedule (any missed sessions within previous month).
- Decompensated liver disease or history of encephalopathy, ascites, variceal bleeding within previous three months.

6. Hematologic and Bleeding Risks

- Patients on anticoagulation therapy with high thromboembolic risk and no bridging plan.
- History of significant bleeding disorders without adequate perioperative management (Hemoglobin $<$ 8g/dL, Platelets $<$ 50,000).

Note: These guidelines provide a framework for patient selection. Clinical judgment, in consultation with anesthesiology and surgical teams, should guide final decisions.