## **Appendix A: Perioperative Medication Management**



From: Perioperative Medication Management – Adult/Pediatric – Inpatient/Ambulatory

Clinical Practice Guideline

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Class	Medication	Decemmendation				
Class	Medication	Recommendation				
	Acid Suppress	ants				
Antacids	Non-soluble Aluminum hydroxide Calcium carbonate Magnesium hydroxide Magnesium oxide	Non-soluble: Recommend to hold therapy the day of surgery  Soluble: Recommend to continue regimen throughout the perioperative	STOP			
	Soluble Sodium bicarbonate Sodium citrate	period	GO			
H₂-Receptor Antagonists	Cimetidine Famotidine Nizatidine Ranitidine	It is reasonable to continue regimen throughout the perioperative period	GO			
Proton pump inhibitors	Dexlansoprazole Esomeprazole Lansoprazole Omeprazole Omeprazole/sodium bicarbonate Pantoprazole Rabeprazole	Parathyroid surgery: Recommend to hold 7 days prior to and day of surgery and post-operatively until directed to resume by surgeon.  All other surgeries: Recommend to continue regimen throughout the perioperative period	STOP			
	Allergen-specific Imm	unotherapy				
	Peanut allergen powder	Recommend to coordinate perioperative medication management plan with surgeon and prescribing physician	<u>^</u>			
	Alpha₁ block	ers				
Alpha₁ blockers	Alfuzosin Doxazosin Phenoxybenzamine Phentolamine Prazosin Silodosin	Cataract surgery: Recommend to coordinate perioperative medication management plan with surgeon	<u> </u>			
	Tamsulosin Terazosin	All other surgeries: Recommend to continue regimen throughout the perioperative period	GO			
	Alpha <sub>2</sub> -adrenergic agonists					
Alpha <sub>2</sub> - agonists	Clonidine Guanfacine Lofexidine Methyldopa Tizanidine	Recommend to continue regimen throughout the perioperative period	GO			
	Analgesics					

Class	Medication		Recommendation		
	Acetaminophen		It is reasonable to continue regimen throughout the perioperative period	GO	
N-type calcium channel blocker	Ziconotide		It is reasonable to continue regimen throughout the perioperative period. Any interruptions in therapy (holding or discontinuing) should be coordinated with prescribing provider.	GO	
Nonsteroidal anti- inflammatory drugs (NSAIDs)	Aspirin Celecoxib Choline magnesium trisalicylate Diclofenac Diflunisal Etodolac Fenoprofen Flurbiprofen Ibuprofen Indomethacin Ketoprofen	Ketorolac Magnesium salicylate Meclofenamate Mefenamic acid Meloxicam Nabumetone Naproxen Oxaprozin Piroxicam Salsalate Sulindac Tolmetin	For aspirin recommendations, refer to the Anti-platelet section.  For non-aspirin NSAIDS, coordinate with surgeon and prescribing provider.	<u>!</u>	
Opioid agonists	Alfentanil Codeine Fentanyl Hydrocodone Hydromorphone Levorphanol Meperidine Methadone Morphine sulfate	Opium Oxycodone Oxymorphone Paregoric Remifentanil Sufentanil Tapentadol Tramadol	Recommend to continue chronic opioid regimen throughout the perioperative period, unless reduction or discontinuation is part of the perioperative analgesic plan.  Abrupt discontinuation of opioids may cause withdrawal symptoms and/or increased pain	GO	
Opioid partial agonists	Buprenorphine Buprenorphine injection Buprenorphine/naloxone (Suboxone®) Butorphanol Morphine sulfate/naltrexone Nalbuphine Pentazocine		Recommend to coordinate perioperative medication management plan with anesthesiologist, surgeon, and prescribing physician	<u> </u>	
		Anorexiants			
Serotonin 2C receptor agonists	Lorcaserin		Recommend to hold therapy 7 days prior to surgery and postoperatively	CTOR	
Sympathomimetic anorexiants	Benzphetamine Diethylpropion	Phendimetrazine Phentermine	until directed to resume by surgeon	STUP	
	Anti-addiction	Agents (see also "Opio	pioid partial agonists" above)		
Antialcoholic agents	Acamprosate calcium Disulfiram		Acamprosate: Recommend to continue regimen throughout the perioperative period	GO	
			<b>Disulfiram</b> : Recommend to hold 7 to14 days prior to surgery	STOP	
Opioid Antagonist	Naltrexone		Recommend to hold oral naltrexone for 1 week prior to surgery and intramuscular naltrexone for 4 weeks prior to surgery	$\wedge$	
			Recommend coordination of post- operative pain management plan with anesthesiologist, surgeon, and primary care physician in order to minimize use of opioids		

Class	Medication		Recommendation	
Nicotine replacement	Nicotine gum, lozenges	, patches, inhalers	Recommend abstinence from smoking in the perioperative period  Recommend to coordinate nicotine replacement perioperative medication management plan with surgeon. If used the day of surgery, gum and lozenges should not be used within 2 hours of procedure	<u>^</u>
		Anti-Dementia (Alzheir	ner's)Agents	
Cholinesterase inhibitors	Donepezil Galantamine Rivastigmine		Recommend to continue cholinesterase inhibitors with the knowledge that adjustments to neuromuscular blocking drugs may be necessary	GO
NMDA receptor antagonist	Memantine		It is reasonable to continue regimen throughout the perioperative period	GO
		Anti-arrhythm	nics	
Anti-arrhythmics	Amiodarone Disopyramide Dofetilide Dronedarone Flecainide Ibutilide	Lidocaine (systemic) Mexiletine Procainamide Propafenone Quinidine	Electrophysiology surgeries/procedures Recommend to coordinate perioperative medication management plan with cardiologist and prescribing provider Non-electrophysiology surgeries/procedures Recommend to continue regimen throughout the perioperative period	GO
		Anti-choliner	gics	
Anti-cholinergics	Cyclizine Dimenhydrinate Diphenhydramine	Meclizine Scopolamine Trimethobenzamide	It is reasonable to continue anti- cholinergics throughout the perioperative period, unless a patient-specific perioperative management plan was provided by the surgeon.	GO
		Anti-coagula	nts	
Anticoagulants	Antithrombin Apixaban Betrixaban Argatroban Bivalirudin Dabigatran Dalteparin	Desirudin Edoxaban Enoxaparin Fondaparinux Heparin Rivaroxaban Warfarin	Recommend to coordinate perioperative medication management including any plan for neuraxial analgesia with surgeon, anesthesiologist and prescribing provider  Refer to Management of Antithrombotic Therapy in the Setting of Periprocedural, Regional Anesthesia and/or Pain Procedures Clinical Practice Guideline	

		Anti-convul:	sants	
Anticonvulsants  Anticonvulsants (GABA analogues) Hydantoins Potassium Channel Openers Succinimides Sulfonamides	Acetazolamide Brivaracetam Cannabidiol (Epidiolex) Carbamazepine Cenobamate Divalproex Eslicarbazepine Felbamate Lacosamide Lamotrigine Gabapentin  Ethotoin Fosphenytoin Ezogabine  Ethosuximide Zonisamide	Levetiracetam Oxcarbazepine Perampanel Primidone Rufinamide Stiripentol Tiagabine Topiramate Valproic acid Vigabatrin  Pregabalin  Phenytoin	Planned Neuromonitoring or Neuromapping Recommend to coordinate anticonvulsant perioperative medication management plan with surgeon, anesthesiologist, and prescribing provider  All other Procedures Recommend to continue anticonvulsant regimens throughout the perioperative period.	<u> </u>
Suironamides	Zonisamide	Anti-diabetic	agents	
Alpha-glucosidase inhibitor  Amylinomimetic  Biguanide  Dipeptidyl Peptidase IV Inhibitor  Glucagon-Like Peptide-1 Receptor Agonist Insulin  Meglitinide Analog	Acarbose Miglitol  Pramlintide  Metformin  Alogliptin Linagliptin  Albiglutide Dulaglutide Exenatide Insulin Aspart Insulin Degludec Insulin Detemir Insulin Glargine  Nateglinide Repaglinide	Saxagliptin Sitagliptin  Liraglutide Lixisenatide Semaglutide Insulin Isophane Insulin Lispro Insulin Regular	Refer to:  • <u>Diabetes Medication</u> Adjustment: Ambulatory Procedures  • <u>Diabetes Medication</u> Adjustment: Inpatient Procedures	<u>^</u>
Sodium-Glucose Cotransporter-2 Inhibitor Sulfonylurea	Canagliflozin Dapagliflozin Chlorpropamide Glimepiride Glipizide	Empagliflozin Ertugliflozin  Glyburide Tolazamide Tolbutamide		
Thiazolidinedione	Pioglitazone	Rosiglitazone		
Antidopaminergics	Chlorpromazine Amisulpride	Anti-dopamin  Metoclopramide Perphenazine	It is reasonable to continue regimen in the perioperative period	GO
	1	Anti-emet	ics	
5HT3 antagonists	Alosetron Dolasetron Granisetron	Ondansetron Palonosetron	It is reasonable to continue regimen in the perioperative period	CO
Phenothiazine Substance P/Neurokinin 1 receptor antagonist	Prochlorperazine  Aprepitant Fosaprepitant Fosnetupitant	Promethazine  Netupitant Rolapitant		GO

		Anti-glaucoma opht	halmics	
Miotics, Cholinesterase Inhibitors	Acetylcholine Carbachol	Echothiophate lodide Pilocarpine	Recommend to continue cholinesterase inhibitors with the knowledge that adjustments to neuromuscular blocking drugs may be necessary.	GO
Alpha Adrenergic Agonists	Apraclonidine	Brimonidine	Recommend to continue ophthalmic alpha adrenergic agonist, beta-	
Beta-Adrenergic Blocking Agents (Beta-Blockers)	Betaxolol Carteolol Levobunolol	Metipranolol Timolol	adrenergic blocking agent (beta- blockers), carbonic anhydrase inhibitor docosanoid, synthetic, and prostaglandin analogue regimens	
Carbonic Anhydrase Inhibitors	Brinzolamide Dorzolamide		throughout the perioperative period	GO
Prostaglandin Analogues	Bimatoprost Latanoprost Latanoprostene bunod	Tafluprost Travoprost		
Rho kinase inhibitor	Netarsudil			
Unoprostone Isopropyl	Unoprostone Isopropyl			
		Anti-histamin	es	
Peripherally selective	Cetirizine Desloratadine Fexofenadine	Loratadine Levocetirizine	Recommend to continue regimen throughout the perioperative period	
Nonselective	Brompheniramine Carbinoxamine Chlorcyclizine Chlorpheniramine Clemastine Cyproheptadine	Dexbrompheniramine Dexchlorpheniramine Diphenhydramine Doxylamine Hydroxyzine Triprolidine		GO
	Ai	nti-hyperlipidemia agent	s (non-statins)	
	Alirocumab Bempedoic acid Cholestyramine Colesevelam Colestipol Evolocumab	Ezetimibe Fenofibrate Gemfibrozil Niacin Lomitapide Mipomersen	Recommend to hold therapy 24 hours prior to surgery and day of surgery to reduce risk of rhabdomyolysis and gastrointestinal obstruction	STOP
	St	atins (HMG-CoA Reduct	ase Inhibitors)	
Statins	Atorvastatin Fluvastatin Lovastatin	Pravastatin Rosuvastatin Simvastatin	Recommend to continue regimen throughout the perioperative period, particularly in patients at high risk for cardiovascular disease	GO

	Anti-infectives				
Amebicides	Iodoquinol (Yodoxin)		Active infection: Recommend to		
Aminoglycosides (oral)	Neomycin	Paromomycin	coordinate perioperative medication management plan with surgeon, anesthesiologist, and prescribing		
Aminoglycosides (parenteral)	Amikacin Gentamicin Plazomicin	Streptomycin Tobramycin	provider Infection Prophylaxis: Recommend		
Anthelmintics	Albendazole (Albenza) Ivermectin (Stromectol) Moxidectin	Praziquantel (Biltricide) Pyrantel (Pin-X) Triclabendazole	to coordinate anti-infectives for prophylaxis indications with surgeon and prescribing provider		
Antibiotic Combinations	Erythromycin/Sulfisoxaz Sulfamethoxazole/Trime				
Antifungal (Allylamine)	Terbinafine Anidulafungin Caspofungin Flucytosine Griseofulvin Micafungin Ketoconazole	Amphotericin B Nystatin Fluconazole Isavuconazonium Itraconazole Posaconazole Voriconazole			
Antimalarial	Chloroquine Hydroxychloroquine Artemether/Lumefantri ne Atovaquone/Proguanil	Primaquine Quinine sulfate Pyrimethamine Mefloquine Tafenoquine		<b>A</b>	
Antiprotozoals	Atovaquone Miltefosine Nitazoxanide	Pentamidine Tinidazole			
Antiretroviral agents	Abacavir Atazanavir Bictegravir Cobicistat Darunavir Delavirdine Didanosine Dolutegravir Doravirine Efavirenz Elvitegravir Emtricitabine Enfuvirtide Etravirine Fosamprenavir Ibalizumab Indinavir	Lamivudine Lopinavir Maraviroc Nefinavir Nevirapine Raltegravir Rilpivirine Ritonavir Saquinavir Stavudine Tenofovir Tipranavir Zidovudine Any antiretroviral combination product			
Antituberculosis Agents	Aminosalicylic acid Benaquiline Capreomycin Cycloserine Ethambutol Ethionamide Isoniazid	Pretomanid Pyrazinamide Rifabutin Rifampin Rifapentine Streptomycin			

Antiviral Agents	Adefovir Amantadine Acyclovir Baloxavir Boceprevir Cidofovir Daclatasvir Elbasvir/grazoprevir Entecavir Famciclovir Foscarnet Ganciclovir Glecaprevir/pibrentasv ir Ledipasvir/Sofosbuvir	Letermovir Ombitasvir/Paritaprevi r/Ritonavir/Dasabuvir Oseltamivir Peramivir Ribavirin Rimantadine Simeprevir Sofosbuvir Tecovirimat Telaprevir Telbivudine Valacyclovir Valganciclovir Voxilaprevir Zanamivir		
Bacitracin	Bacitracin			
Carbapenems	Doripenem Ertapenem Imipenem/Cilastatin	Meropenem Meropenem/vaborbact am		
Cephalosporins	Cefaclor Cefadroxil Cefazolin Cefdinir Cefditoren Cefepime Cefiderocol Cefixime Cefotaxime Cefotetan	Cefoxitin Cefpodoxime Cefprozil Ceftaroline Ceftazidime Ceftazidime/Avibacta m Ceftriaxone Cefuroxime Cephalexin	Active infection: Recommend to coordinate perioperative medication management plan with surgeon, anesthesiologist, and prescribing provider  Infection Prophylaxis: Recommend	
	Chloramphenicol		to coordinate anti-infectives for	
	Colistimethate		prophylaxis indications with surgeon	
Fluoroquinolones	Ciprofloxacin Delafloxacin Gemifloxacin Levofloxacin	Moxifloxacin Norfloxacin Ofloxacin (drops) Ozenoxacin	and prescribing provider	
Folate Antagonists	Trimethoprim			
Glycylcylines	Tigecycline			
Ketolides	Telithromycin			
Leprostatics	Dapsone			
Lincosamides	Clindamycin	Lincomycin		
Lipoglycopeptides	Dalbavancin Oritavancin	Telavancin		
Lipopeptides	Daptomycin			
Macrolides	Azithromycin Clarithromycin	Erythromycin Fidaxomicin		
Methenamines	Methenamine Hippurate Methenamine Mandelate	)		
Miscellaneous	Benznidazole Fosfomycin Lefamulin	Metronidazole Rifamycin Secnidazole		
Monobactams	Aztreonam			
Monoclonal antibodies	Bezlotoxumab			
Nitrofurans	Nitrofurantoin			
Oxazolidinones	Linezolid	Tedizolid		

Penicillins	Amoxicillin Amoxicillin/Clavulanat e Ampicillin Ampicillin/sulbactam Dicloxacillin Nafcillin Polymyxin B Sulfate Rifaximin	Oxacillin Penicillin G Penicillin V Piperacillin/Tazobacta m Ticarcillin/Clavulanate	Active infection: Recommend to coordinate perioperative medication management plan with surgeon, anesthesiologist, and prescribing provider	
Streptogramins	Quinupristin/Dalfopristin		Infection Prophylaxis: Recommend to coordinate anti-infectives for	
Sulfadiazine	Sulfadiazine		prophylaxis indications with surgeon	
Tetracyclines	Demeclocycline Doxycycline Eravacycline Minocycline	Omadacycline Sarecycline Tetracycline	and prescribing provider	
Vancomycin	Vancomycin			
		Anti-over active blade	ler agents	
Anticholinergic	Oxybutynin		It is reasonable to continue regimen	
Muscarinic receptor antagonist	Darifenacin Fesoterodine Solifenacin	Tolterodine Trospium	throughout the perioperative period	
M3 muscarinic agonist	Mirabegron			GO
Phosphodiesterase inhibitor	Flavoxate			
		Anti-neoplasti	cs	
Alkylating Agents	Altretamine Busulfan Carmustine Chlorambucil Dacarbazine Estramustine	Ifosfamide Lomustine Mechlorethamine Melphalan Streptozocin Thiotepa	Recommend to coordinate antineoplastic perioperative medication management plan with surgeon and prescribing provider	
Anthracenedione	Mitoxantrone	111,232,231		
Antibody-Drug Conjugates	ADO-Trastuzumab Brentuximab Vedotin Emtansine	Enfortumab vedotin Fam-trastuzumab deruxtecan Polatuzumab vedotin		
Antimetabolites	Allopurinol Capecitabine Cladribine Clofarabine Cytarabine Floxuridine Fludarabine Fluorouracil	Gemcitabine Mercaptopurine Methotrexate Pemetrexed Pentostatin Pralatrexate Rasburicase Thioguanine		
Antimitotic agents	Cabazitaxel Docetaxel Eribulin Ixabepilone	Paclitaxel Vinblastine Vincristine Vinorelbine		
Antineoplastic Antibiotics	Bleomycin Dactinomycin Daunorubicin Doxorubicin	Epirubicin Idarubicin Mitomycin Valrubicin		
BCL-2 Inhibitor	Venetoclax			
Biologic Response Modifiers	Aldesleukin	BCG live		
Cytoprotective Agents	Amifostine Dexrazoxane Leucovorin	Levoleucovorin Mesna		

	T		ı	1
DNA	Azacitidine			
Demethylation	Decitabine			
Agents	Nelarabine			
DNA	Irinotecan			
Topoisomerase	Topotecan			
Inhibitors		1 -		
Enzymes	Asparaginase	Pegaspargase		
	Calaspargase			
Epipodophyllotoxin	Etoposide	Teniposide		
EZH2-Inhibitor	Tazemetostat	'	1	
		15		
Histone	Belinostat	Romidepsin Vorinostat		
Deacetylase Inhibitors	Panobinostat	vonnostat		
	Abinatanana	Canadia	-	
Hormones	Abiraterone Anastrazole	Goserelin Histelin		
	Apalutamide	Letrozole		
	Bicalutamide	Leuprolide		
	Buserelin	Medroxyprogesterone		
	Darolutamide	Megestrol		
	Enzalutamide	Nilutamide		
	Exemestane	Tamoxifen		
	Flutamide	Toremifene		
	Fulvestrant	Triptorelin		
Hedgehog Pathway	Glasdegib	Vismodegib		•
Inhibitor	Sonidegib			
Imidazotetrazine	Temozolomide		Recommend to coordinate	^
derivatives			antineoplastic perioperative	
Kinase inhibitors	Abemaciclib	Ibrutinib	medication management plan with	
	Acalabrutinib	Idelalisib	surgeon and prescribing provider	
	Afatinib	Imatinib	tangetti and processing process	
	Alectinib	Ivosidenib		
	Alpelisib	Lapatinib		
	Axitinib	Lenvatinib		
	Binimetinib	Lorlatinib		
	Bosutinib	Larotrectinib		
	Brigatinib Cabozantinib	Midostaurin Neratinib		
	Ceritinib	Nilotinib		
	Cobimetinib	Osimertinib		
	Copanlisib	Palbociclib		
	Crizotinib	Pazopanib		
	Dabrafenib	Pexidartinib		
	Dacomitinib	Ponatinib		
	Dasatinib	Regorafenib		
	Duvelisib	Ribociclib		
	Encorafenib	Ruxolitinib		
	Enasidenib	Sorafenib		
	Entrectinib	Sunitinib Temsirolimus		
	Erdafitinib Erlotinib	Trametinib		
	Everolimus	Vandetanib		
	Gefitinib	Vemurafenib		
	Gilteritinib	Zanubrutinib		
Methylhydrazine	Procarbazine		1	
derivatives				
Miscellaneous	Arsenic Trioxide	Sterile Talc Powder	1	
Antineoplastics	Mitotane	Trabectedin		
	Porfimer	Trifluridine/tipiracil		
	Sipuleucel-T	,		
Monoclonal	Alemtuzumab	Ipilimumab	1	
antibodies	Atezolizumab	Mogamuliziumab		
	Avapritinib	Moxetumomab		
	Avelumab	Necitumumab		
	Bevacizumab (and	Nivolumab		
	biosimilars)	Obinutuzumab		
	Blinatumomab	Ofatumumab		

PARP Enzymes Inhibitor Platinum Coordination Complex	Brolucizumab Cemiplimab Cetuximab Daratumumab Dinutuximab Elotuzumab Gemtuzumab Ibritumomab Inotuzumab Niraparib Olaparib Carboplatin Cisplatin Oxaliplatin	Olaratumab Panitumumab Pertuzumab Ramucirumab Rituximab (and biosimilars) Tagraxofusp Trastuzumab (and biosimilars) Rucaparib Talazoparib	Recommend to coordinate antineoplastic perioperative	
Proteasome Inhibitors	Bortezomib Carfilzomib	Ixazomib	medication management plan with surgeon and prescribing provider	
Protein Synthesis Inhibitor	Omacetaxine	<u> </u>		
Radiopharmaceutic als	Lutetium Lu-177 Radium Ra-223 Samarium Sm-153 Sodium Iodide I-131 Strontium-89 Chloride			
Retinoids	Tretinoin Trifarotene			
Rexinoids	Bexarotene			
Substituted Ureas	Hydroxyurea			
Vascular Endothelial Growth Factor	ZIV-Aflibercept			
		Anti-osteoporosis	Agents	
Bisphosphonates	Alendronate Etidronate Ibandronate Pamidronate	Risedronate Tiludronate Zolendronic Acid	Dental surgeries: Recommend to coordinate anti-osteoporosis perioperative medication management plan with surgeon and prescribing provider	
Calcitonin-salmon	Calcitonin-salmon		All other surgeries: Recommend to hold bisphosphonate	CTOR
Denosumab	Denosumab		therapy the day of surgery and postoperatively until directed to	STOP
Romosozumab	Romosozumab		resume by surgeon and to coordinate perioperative calcitonin and denosumab medication management plan with surgeon and prescribing provider	
		Anti-Parkinson's	Agents	
Antiparkinson agents	Amantadine Apomorphine Belladonna alkaloids Benztropine Bromocriptine Carbidopa Carbidopa/Levodopa Carbidopa/Levodopa/E ntacapone	Istradefylline Entacapone Pramipexole Rasagiline Ropinirole Rotigotine Selegiline Tolcapone	Recommend to continue regimen throughout the perioperative period	GO
		Anti-platele	ts	
Antiplatelet agents	Anagrelide Dipyridamole Dipyridamole/Aspirin Cangrelor Cilostazol Clopidogrel	Prasugrel Ticagrelor Ticlopidine Vorapaxar	Recommend to coordinate perioperative medication management plan with surgeon, anesthesiologist, and prescribing provider (e.g. interventional	<u> </u>

			cardiologist, neurosurgeon, vascular surgeon)	
		Anti-psycho	ics	
1 <sup>st</sup> generation – Typical	Chlorpromazine Fluphenazine Haloperidol Loxapine Perphenazine	Pimozide Prochlorperazine Thioridazine Thiothixene Trifluoperazine	Recommend to continue regimen throughout the perioperative period	
2 <sup>nd</sup> generation – Atypical	Aripiprazole Asenapine Brexpiprazole Cariprazine Clozapine Iloperidone Lumateperone	Lurasidone Olanzapine Paliperidone Pimavanserin Quetiapine Risperidone Ziprasidone		GO
		Antirheumatic A	Agents	
Janus associated kinase (JAK) inhibitors	Baricitinib Fedratinib Ruxolitinib Tofacitinib Upadacitinib		Orthopedic surgery: Recommend to hold therapy 48 hours prior to surgery and resume 7-14 days post-operatively if there are no signs or symptoms of infection and incisions are healing well  All other surgeries: Recommend to	STOP
			coordinate perioperative medication management plan with surgeon and prescribing provider	
Antimetabolites	Methotrexate		Orthopedic surgery: Recommend to continue regimen throughout the perioperative period	GO
			All other surgeries: Recommend to coordinate perioperative medication management plan with surgeon and prescribing provider	
Anti-TNF-alpha agents	Adalimumab (and biosim Certolizumab Etanercept (and biosimila Golimumab Infliximab (and biosimilar	ars)	Orthopedic surgery: Recommend to hold etanercept 2 weeks prior to surgery	STOP
	illiamad (and biosimilars)		Orthopedic surgery: Recommend to coordinate all other anti-TNF-alpha agent perioperative medication management plan with surgeon and prescribing provider	<u>←</u>
			All other surgeries: Recommend to coordinate perioperative medication management plan with surgeon and prescribing provider	
Gold compounds	Auranofin Gold sodium thiomalate		Orthopedic surgery: Recommend to continue regimen throughout the perioperative period	GO
			All other surgeries: Recommend to coordinate perioperative medication management plan with surgeon and prescribing provider	

Interleukin-6 blockers	Tocilizumab		Orthopedic surgery: Recommend to  • hold subcutaneous tocilizumab 3 weeks prior to surgery  • hold intravenous tocilizumab 4 weeks prior to surgery  All other surgeries: Recommend to	STOP
			coordinate perioperative medication management plan with surgeon and prescribing provider	
Interleukin-1 blockers	Anakinra		Orthopedic surgery: Recommend to hold subcutaneous anakinra 7 days prior to surgery	STOP
			All other surgeries: Recommend to coordinate perioperative medication management plan with surgeon and prescribing provider	<u>•</u>
Phosphodiesterase -4 enzyme inhibitor	Apremilast		Orthopedic surgery: Recommend to coordinate perioperative medication management plan with surgeon and prescribing provider	$\triangle$
			All other surgeries: Recommend to coordinate perioperative medication management plan with surgeon and prescribing provider	
Pyrimidine synthesis inhibitors	Leflunomide	. (0	Orthopedic surgery: Recommend to hold 14 days prior to surgery	STOP
			All other surgeries: Recommend to coordinate perioperative medication management plan with surgeon and prescribing provider	$\triangle$
Selective T-cell costimulation blocker	Abatacept		Orthopedic surgery: Recommend to hold subcutaneous abatacept 2 weeks prior to surgery and intravenous abatacept 4 weeks prior to surgery	STOP
			All other surgeries: Recommend to coordinate perioperative medication management plan with surgeon and prescribing provider	
		Beta-blocker	rs	
Beta-Adrenergic Blocking Agents (Beta-Blockers)	Acebutolol Atenolol Betaxolol Bisoprolol Esmolol Metoprolol Nadolol	Nebivolol Penbutolol Pindolol Propranolol Sotalol Timolol	Recommend to continue beta-blocker regimens throughout the perioperative period unless contraindicated by hemodynamic instability or profound bronchospasm	GO
Alpha/Beta- Adrenergic Blocking Agents	Carvedilol Labetalol			
		Benzodiazepir	nes	
Benzodiazepines	Alprazolam Chlordiazepoxide Clobazam Clonazepam	Clorazepate Diazepam Lorazepam Oxazepam	Recommend to continue regimen throughout the perioperative period	GO

		Calcium Chan	nel Blockers	
Calcium channel blockers	Amlodipine Clevidipine Diltiazem Felodipine Isradipine	Nicardipine Nifedipine Nimodipine Nisoldipine Verapamil	Recommend to continue regimen throughout the perioperative period	GO
			ts – Miscellaneous	
Alpha₁-Agonist	Midodrine		Recommend to continue regimen throughout the perioperative period	GO
Cardiac Glycoside	Digoxin		Recommend to continue regimen throughout the perioperative period	GO
Central Monoamine- Depleting Agent	Deutetrabenazine Reserpine Tetrabenazine Valbenazine		Recommend to coordinate perioperative medication management plan with anesthesiologist, surgeon and prescribing provider	
Cyclic nucleotide- gated (HCN) channels (f- channels)	Ivabradine		Recommend to continue regimen throughout the perioperative period	GO
Dopamine Agonist	Fenoldopam		Recommend to coordinate perioperative medication management plan with anesthesiologist, surgeon and prescribing provider	<u> </u>
Ganglionic Blocker	Mecamylamine		Recommend to coordinate perioperative medication management plan with anesthesiologist, surgeon and prescribing provider	<u> </u>
Inotropics	Inamrinone Milrinone		Recommend to coordinate perioperative medication management plan with anesthesiologist, surgeon and prescribing provider	<u> </u>
Inward sodium channel inhibitor	Ranolazine		Recommend to continue regimen throughout the perioperative period	GO
Potassium removing resins	Patiromer Sodium polystyrene sulfo Sodium zirconium cyclos		Recommend to coordinate perioperative medication management plan with anesthesiologist, surgeon and prescribing provider	<u> </u>
Transthyretin stabilizer	Tafamidis		Recommend to coordinate perioperative medication management plan with anesthesiologist, surgeon and prescribing provider	
		ntral Nervous Syste	em – Miscellaneous	
Antianxiety agent	Buspirone Meprobamate		Recommend to continue regimen throughout the perioperative period	GO
Antidepressants	Bupropion Nefazodone hydrochloric Trazodone Vortioxetine	de	Recommend coordination of perioperative medication management plan with surgeon, anesthesiologist, and prescribing provider	

Anticholinesterase	Edrophonium		Recommend coordination of	$\wedge$
muscle stimulants	Neostigmine Pyridostigmine		perioperative medication management plan with surgeon,	
	1 yhdostighine		anesthesiologist, and prescribing	
			provider	
Antioxidants	Edaravone		Recommend coordination of	^
			perioperative medication	
			management plan with surgeon, anesthesiologist, and prescribing	
			provider	
Antisense	Eteplirsen		Recommend to coordinate antisense	^
Oligonucleotide	Golodirsen		oligonucleotide management plan	
	Inotersen Nusinersin		with anesthesiologist, surgeon, and	
			prescribing provider	
Cholinergic muscle	Guanidine		Recommend coordination of	$\wedge$
stimulant			perioperative medication management plan with surgeon,	
			anesthesiologist, and prescribing	
			provider	
CNS stimulants	Amphetamine	Doxapram	Armodafinil, Modafinil:	^
	Armodafinil Caffeine	Lisdexamfetamine Methamphetamine	Recommend to coordinate perioperative medication	
	Dexmethylphenidate	Methylphenidate	management plan with	
	Dextroamphetamine	Modafinil	anesthesiologist, surgeon, and	
	·		prescribing provider	
			All other CNS stimulants:	
			Recommend to continue regimen throughout the perioperative period	$(\mathbf{GO})$
			unoughout the perioperative period	
Dopamine and	Solriamfetol		Recommend to coordinate	$\wedge$
Norepinephrine			perioperative management plan with anesthesiologist, surgeon, and	
Reuptake Inhibitor			prescribing provider	
Glutamate Inhibitor	Riluzole			
Giutamate minibitor	Kiluzole		Recommend to continue regimen throughout the perioperative period	
				( <b>GO</b> )
Lithium	Lithium		Recommend to continue regimen	
			throughout the perioperative period	$(\mathbf{GO})$
Miscellaneous	Atomoxetine		Atomoxetine: Recommend to	
psychotherapeutic	Sodium oxybate		continue regimen throughout the	
agents			perioperative period	( <b>GO</b> )
			Pitolisant, Sodium oxybate:	^
			Recommend to coordinate	
			perioperative management plan with	
			anesthesiologist, surgeon, and prescribing provider	
Mixed 5HT <sub>1A</sub>	Flibanserin		Recommend to coordinate	^
agonist/5HT <sub>2A</sub>			perioperative management plan with	
antagonist			anesthesiologist, surgeon, and	
			prescribing provider	<u> </u>
NMDA Antagonist	Esketamine		Recommend to coordinate	
			perioperative management plan with anesthesiologist, surgeon, and	
			prescribing provider	
Partial neuronal α4	Varenicline		Recommend to hold therapy the day	
β2 nicotinic	valeiliolilie		of surgery and post-operatively until	
receptor agonist			directed to resume by surgeon	STOP
	i .			

	<u></u>		<u></u>	
Potassium Channel Blocker	Amifampridine Dalfampridine		Recommend to continue regimen throughout the perioperative period	GO
Tripeptidyl peptidase-1 (TPP- 1) analog	Cerliponase alfa		Recommend to coordinate perioperative management plan with anesthesiologist, surgeon, and prescribing provider	
		Corticosteroi	d	
Corticosteroid	Betamethasone Budesonide Cortisone Cosyntropin Deflazacort Dexamethasone	Hydrocortisone Fludrocortisone Methylprednisolone Prednisolone Prednisone Triamcinolone	Recommend to continue regimen throughout the perioperative period	GO
		Diuretics		
Carbonic anhydrase inhibitors	Acetazolamide Methazolamide		Heart failure of volume overload indication: Recommend to coordinate diuretic	$\wedge$
Diuretic Combinations	Amiloride/Hydrochloroth Spironolactone/ Hydroch Triamterene/ Hydrochlor	nlorothiazide	perioperative management plan with anesthesiologist, surgeon, and prescribing provider	
Loop Diuretics	Bumetanide Ethacrynic Acid	Furosemide Torsemide	Hypertension indication:  Recommend to hold diuretic the day	STOP
Osmotic	Mannitol		of surgery	
Potassium Sparing	Amiloride Spironolactone	Triamterene		
Thiazides	Chlorothiazide Chlorthalidone Hydrochlorothiazide	Indapamide Methyclothiazide Metolazone		
	Est	rogens and Progestins -	- Miscellaneous	
Estrogen	Conjugated Estrogens Ethinyl Estradiol Estradiol valerate Esterified Estrogens	Estradiol Estradiol Cypionate Estropipate	Recommend to coordinate perioperative management plan with surgeon, and prescribing provider	
Progestins	Desogestrel Drospirenone Etonogestrel Ethynodiol Diacetate Hydroxyprogesterone caproate Levonorgestrel Medroxyprogesterone acetate	Megestrol Acetate Norelgestromin Norgestimate Norgestrel Norethindrone Acetate Progesterone Segesterone Ulipristal		
Selective Estrogen	Bazedoxifene	Ospemifene		
Receptor Modulator	Clomiphene Citrate	Raloxifene		
	Endoc	rine and Metabolic Agen		
4- Hydroxyphenylpyru vate dioxygenase inhibitor	Nitisinone		It is reasonable continue regimen throughout the perioperative period.	
5-Alpha Reductase	Dutasteride			
Inhibitor Anabolic Steroid	Finasteride			(GO)
	Oxymetholone	Mothyltostastassas	-	(GO)
Androgens	Danazol Oxandrolone Fluoxymesterone	Methyltestosterone Testosterone		
Anti-androgen	Cyproterone	Dienogest		
Antithyroid Agents	Methimazole Propylthiouracil	Sodium Iodide		
Betaine Anhydrous	Betaine Anhydrous			

Bile Acids	Cholic Acid			
Bromocriptine	Bromocriptine Mesylate		1	
Mesylate			-	
Cabergoline	Cabergoline	T =		
Calcimimetics	Cinacalcet	Etelcalcetide		
Carglumic acid	Carglumic acid			
Chelating Agent	Deferasirox Deferiprone	Deferoxamine		
Cysteamine	Cysteamine			
Cystic fibrosis transmembrane conductance regulator potentiator	Elexacaftor Ivacaftor Lumacaftor Tezacaftor			
Detoxification agents	Dimercaprol Edetate Calcium Disodium Pentetate Calcium Trisodium Pentetate Zinc Trisodium	Prussian Blue (Ferric Hexacyanoferrate) Succimer (DMSA) Trientine Hydrochloride		
Enzyme replacement	Asfotase Agalsidase Beta Alglucosidase alfa Elosulfase alfa Galsulfase Idursulfase	Imiglucerase Laronidase Sebelipase Taliglucerase Alfa Velaglucerase alfa		
Farnesoid X receptor agonist	Obeticholic acid			
Glucosylceramide Synthase Inhibitor	Eliglustat Miglustat			
Glycerol Phenylbutyrate	Glycerol Phenylbutyrate			
Gonadotropin Releasing Hormone Agonist	Nafarelin			GO
Gonadotropin Releasing Hormone Antagonist	Cetrorelix Degarelix	Elagolix Ganirelix		
Growth Hormone	Somatropin			
Growth Hormone Agonists	Macimorelin			
Insulin-like growth factor	Mecasermin			
Lipodystrophy agents	Metreleptin Tesamorelin			
Lipolytic	Deoxycholic acid			
Ovulation Stimulator	Choriogonadotropin Alfa Chorionic Gonadotropin Follitropin alfa	Follitropin beta Lutropin Alpha Menotropins Urofollitropin		
Melanocortin receptor agonist	Bremelanotide			
Parathyroid hormone analogues	Abaloparatide Parathyroid	Teriparatide		
Pegvisomant	Pegvisomant			
Pharmacologic Chaperone	Migalastat			
Phenylketonuria agents	Sapropterin Dichloride			

Discontinuo D'estern	Linghama		T	T
Phosphate Binders	Lanthanum	Sevelamer		
Posterior Pituitary Hormones	Desmopressin Vasopressin			
Selective Estrogen Receptor Modulator	Bazedoxifene Clomiphene Citrate	Ospemifene Raloxifene		
Sodium Benzoate and Sodium Phenylacetate	Sodium Benzoate and S	odium Phenylacetate		
Sodium Phenylbutyrate	Sodium Phenylbutyrate			
Somatostatin Analogs	Lanreotide Octreotide	Pasireotide		
Thyroid Drugs	Potassium Iodide Levothyroxine Sodium Liothyronine Sodium	Liotrix Thyroid Desiccated		GO
Tryptophan hydroxylase inhibitors	Telotristat			
Uridine Triacetate				
Uterine Active Agents	Carboprost Dinoprostone Methylergonovine	Mifepristone Oxytocin		
Vasopressin Receptor Antagonists	Maleate Conivaptan Hydrochlorid Tolvaptan	 de		
-		Gastrointestinal Agents	- Lavativas	
Bowel evacuants	Polyethylene glycol (PEI PEG-electrolyte combine Sodium phosphate	G) ation	Recommend to coordinate perioperative medication management plan with surgeon and	
Bulk-producing laxatives	Sodium phosphate/mag Calcium polycarbophil Methylcellulose	Psyllium	prescribing provider	$\wedge$
Emollients	Mineral oil		-	
Surfactants	Docusate calcium	Docusate sodium	-	
Hyperosmotic	Glycerin	Lactulose	-	
agents	Lactilol	Sorbitol		
Stimulants	Bisacodyl Cascara sagrada	Sennosides		
	Ga	strointestinal Agents –	Miscellaneous	
5-Aminosalicylic Acid Derivative	Balsalazide Mesalamine	Olsalazine Sulfasalazine	Recommend to continue regimen throughout the perioperative period	GO
Antidiarrheals	Bismuth subsalicylate Crofelemer Difenoxin/atropine Diphenoxylate/atropine Loperamide		Bismuth subsalicylate: Recommend to hold bismuth subsalicylate the day of surgery due to the potential to cause black stools	STOP
	Loperamide/simethicone	9	All other medications: It is reasonable to continue other antidiarrheals throughout the perioperative period	GO
Antiflatulents	Alpha-d-galactosidase	Simethicone	Sucralfate: Recommend to hold sucralfate the day of surgery	
Antispasmodics	Dicyclomine		Sacranate the day of surgery	STOP
Belladonna alkaloids	Atropine sulfate Hyoscyamine sulfate	Scopolamine		

Cholinergic Agonist	Cevimeline	Pilocarpine	All other medications:	
Chloride Channel	Lubiprostone		Recommend to continue regimen	
Activator	Denoractic Englished	Donorolinoso	throughout the perioperative period	
Digestive Enzymes	Pancreatic Enzymes	Pancrelipase		
GI Anticholinergic Combinations	Atropine/scopolamine/hy al Clidinium/chlordiazepoxi			
GI Quaternary Anticholinergics	Glycopyrrolate Mepenzolate	Methscopolamine Propantheline		
GI stimulants	Dexpanthenol Metoclopramide	Prucalopride Tegaserod		
GLP-2 analogs	Teduglutide			
Glutamine	L-glutamine		1	
Guanylate cyclase- C agonist	Linaclotide Plecanatidecalci			
Miscellaneous	Eluxadoline Sucralfate Chenodiol Ursodiol	Alvimopan Methylnaltrexone Naloxegol Tenapanor		
Systemic Deodorizers	Bismuth subgallate Chlorophyll derivatives	Chlorophyllin		
	Genito	ourinary and Renal Agen	ts - Miscellaneous	
Cystine depleting agents	Cysteamine bitartrate Penicillamine	Tiopronin	It is reasonable to continue regimen throughout the perioperative period	
Interstitial cystitis	Dimethyl sulfoxide	Phenazopyridine		
agents	Pentosan polysulfate sodium	Phenazopyridine/buta barbital/hyoscyamine		
Urinary acidifiers	Ascorbic acid			
Urinary cholinergics	Bethanechol			GO
Urinary alkalinizers	Potassium citrate Sodium bicarbonate Sodium bicarbonate/citri	c acid (Shohl's solution)		
Miscellaneous	Acetohydroxamic acid Cellulose sodium phosp	hate		
		Gout Agents	3	
β-tubulin	Colchicine		Recommend to coordinate	$\wedge$
polymerization inhibitor			perioperative medication management plan with surgeon and prescribing provider	
Uric acid transporter-1 (URAT-1) inhibitor	Lesinurad		It is reasonable to continue regimen throughout the perioperative period	GO
Xanthine Oxidase Inhibitor	Allopurinol Febuxostat		It is reasonable to continue regimen throughout the perioperative period	GO
Recombinant urate- oxidase	Pegloticase		It is reasonable to continue regimen throughout the perioperative period	GO
Uricosurics	Probenecid		Recommend to hold therapy the day of surgery and postoperatively until directed to resume by surgeon	STOP

Hematological Agents – Miscellaneous					
For additional	information, see Manage	ement of Antithrombo	otic Therapy in the Setting of Periprocedu	<u>ıral, Regional</u>	
Antihemophilic agents	Anti-inhibitor coagulant of Anti-inhibitor coagulant of Antihemophilic Factor VI Coagulation Factor XIIIa Factor IX Factor VIIa Factor XIII	complex II	Recommend to coordinate perioperative medication management plan with anesthesiologist, surgeon, and prescribing provider	$\wedge$	
Antihemophilic Factor Combinations	Antihemophilic factor/voi Complex	n Willebrand Factor			
Anti-von Willebrand Factor	Caplacizumab		Recommend to coordinate perioperative medication management plan with anesthesiologist, surgeon, and prescribing provider	$\triangle$	
Antisickling agents	Hydroxyurea Voxelotor		Recommend to continue regimen in the perioperative period	GO	
Bradykinin inhibitors	Icatibant		It is reasonable to continue regimen in the perioperative period	GO	
Coagulants	Protamine		Recommend to coordinate perioperative medication management plan with anesthesiologist, surgeon, and prescribing provider	<u></u>	
Erythropoiesis- stimulating agents	Darbepoetin and biosimilars Epoetin Alfa and biosimilars Epoetin Beta and biosimilars Methoxy Polyethylene Glycol-Beta		It is reasonable to continue regimen in the perioperative period	GO	
Hematopoietic stem cell mobilizer	Plerixafor		Recommend to coordinate perioperative medication management plan with surgeon and prescribing provider	<u>^</u>	
Granulocyte-colony stimulating factors	Filgrastim (and biosimila Pegfilgrastim (and biosir		Recommend to coordinate perioperative medication management plan with surgeon and prescribing provider	<u> </u>	
Granulocyte macrophage colony-stimulating factor	Sargramostim		Recommend to coordinate perioperative medication management plan with surgeon and prescribing provider	<u>^</u>	
Thrombopoietic agents	Avatrombopag Eltrombopag Lusutrombopag	Oprelvekin Romiplostim	Recommend to coordinate perioperative medication management plan with surgeon and prescribing provider	<u> </u>	
Porphyria Agents	Hemin Givosiran		Recommend to coordinate perioperative medication management plan with anesthesiologist, surgeon, and prescribing provider	<u> </u>	
Hemorrheologic agents	Pentoxifylline		Recommend to coordinate perioperative medication management plan with anesthesiologist, surgeon, and prescribing provider		

Hemostatics	Absorbable Gelatin	Oxidized Cellulose	Recommend to coordinate	
Tiomostatios	Aminocaproic Acid Ferric subsulfate Fibrinogen Concentrate Microfibrillar Collagen	Prothrombin Complex Concentrate Thrombin Tranexamic Acid	perioperative medication management plan with anesthesiologist, surgeon, and prescribing provider	$\triangle$
Kallikrein Inhibitor	Hemostat Ecallantide Lanadelumab		It is reasonable to continue regimen in the perioperative period	GO
Plasma expanders	Albumin Human Dextran 40 Hetastarch	Plasma Protein Fraction Tetrastarch	It is reasonable to continue regimen in the perioperative period	GO
Protein C1 inhibitors	C1 Inhibitor (Cinryze)	I	Recommend to continue regimen in the perioperative period	GO
Thrombolytic agents	Alteplase Defibrotide Protein C Concentrate	Reteplase Tenecteplase Urokinase	Recommend to coordinate perioperative medication management plan with anesthesiologist, surgeon, and prescribing provider	
Monoclonal Antibodies	Crizanlizumab		Recommend to coordinate perioperative medication management plan with anesthesiologist, surgeon, and prescribing provider	
		Herbals and Suppl	ements	
Amino Acids	Levocarnitine L-Lysine	Methionine Threonine	Inborn errors of metabolism Recommend to coordinate use of	<u> </u>
Cannabidiol	CBD oil, OTC or suppler Epidiolex prescription fo	ment; not including	supplements and perioperative medication management plan with	
Electrolytes	Potassium	Sodium Chloride	anesthesiologist, surgeon, and prescribing provider	
Fish Oils	Omega-3 Fatty Acids		All other patients	
Lipotropics	Choline	Inositol	Recommend to hold herbals and supplements 7 days prior to surgery.	STOP
Minerals	Calcium Magnesium	Phosphorus	supplements 7 days prior to surgery.	
Systemic Alkalinizers	Citric Acid Citrate	Tromethamine		
Trace Elements	Chromium Copper Fluoride Ferric Maltol	Iron Manganese Selenium Zinc		
Vitamins	Beta-Carotene Phytonadione (Vitamin K) Vitamin A Calcitriol Cholecalciferol Doxercalciferol Ergocalciferol Paricalcitol Vitamin E Aminobenzoate potassium Bioflavonoids Biotin	Hydroxycobalamin Cobalamin (B12) Folic Acid Niacin (B3) Niacinamide Pantothenic Acid (B5) Pyridoxine (B6) Riboflavin (B2) Thiamine (B1) Ascorbic acid (Vitamin C) Calcium Ascorbate Sodium Ascorbate		
Miscellaneous	Coenzyme Q10 Edavarone	Lactase Sacrosidase		

		Immunologic A	gents	
Immunomodulators	Abatacept Adalimumab (and biosimilars) Anakinra Apremilast Brodalumab Canakinumab Certolizumab Daclizumab Dimethyl Fumarate Diroximel Fumarate Etanercept (and biosimilars) Fingolimod Golimumab Guselkumab Infliximab (and biosimilars)	Interferons Ixekizumab Lenalidomide Mitoxantrone Natalizumab Pembrolizumab Pomalidomide Rilonacept Secukinumab Selinexor Siponimod Risankizumab Teriflunomide Thalidomide Tildrakizumab Ustekinumab Vedolizumab	Recommend to coordinate perioperative medication management plan with surgeon and prescribing provider	
Immunostimulants Immunosuppressiv es	Elapegdemase  Alefacept Azathioprine Basiliximab Belatacept Cyclosporine Dupilumab	Pegademase Bovine Durvalumab Glatiramer Mycophenolate Ocrelizumab Sirolimus Tacrolimus		
Keratinocyte Growth Factors Miscellaneous Monoclonal Antibodies	Palifermin  Belimumab Burosumab Denosumab Eculizumab	Palivizumab Ravulizumab Raxibacumab Sarilumab Siltuximab Teprotumumab		
	4	Intranasal anti-a	llergy	
Antihistamines Mast cell stabilizers Steroids	Azelastine Cromolyn Beclomethasone Budesonide Ciclesonide	Olopatadine  Fluticasone Mometasone Triamcinolone	It is reasonable to continue regimen in the perioperative period	GO
	Flunisolide	Migraine Age	nte	
Sympathomimetic Serotonin 5HT <sub>1B,1D</sub> Agonist (triptans)	Isometheptene Almotriptan Eletriptan Frovatriptan Naratriptan	Rizatriptan, Sumatriptan, Zolmitriptan	Recommend to hold therapy the day of surgery, although may be approved with coordination of anesthesiologist	
Serotonin 5HT <sub>1F</sub> Agonist Ergot Derivatives	Lasmiditan  Dihydroergotamine mes Ergotamine tartrate	ylate	_	STOP
Calcitonin Gene- related Peptide Receptor Antagonist	Eptinezumab Erenumbe Fremanezumab Galcanezumab	Rimegepant Ubrogepant		
	T	Monoamine Oxidase		
Monoamine Oxidase Inhibitors (MAOI)	Isocarboxazid Phenelzine Tranylcypromine		Recommend to coordinate perioperative medication management plan with anesthesiologist, surgeon, and prescribing provider	$\triangle$

		Ophthalmic Agents - Mis	scellaneous	
Cycloplegic Mydriatics	Atropine Sulfate Cyclopentolate HCI Homatropine HBr Scopolamine HBr	Cyclopentolate/Phenyl ephrine Hydroxyamphetamine Hydrobromide/Tropica mide	Recommend to continue regimen throughout the perioperative period	
Antibiotics	Tropicamide  Azithromycin Bacitracin Besifloxacin Ciprofloxacin HCl Erythromycin Gatifloxacin	Gentamicin Levofloxacin Moxifloxacin Ofloxacin Sulfacetamide Tobramycin		
Antihistamines	Alcaftadine Azelastine HCI Emedastine difumarate	Epinastine HCl Ketotifen Olopatadine HCl		
Corticosteroids	Dexamethasone Difluprednate Fluocinolone acetonide Fluorometholone acetate	Loteprednol etabonate Prednisolone Rimexolone Triamcinolone acetonide		
Decongestants	Naphazoline HCl Oxymetazoline HCl	Phenylephrine HCI Tetrahydrozoline HCI		
Decongestant/ Antihistamine	Naphazoline/Pheniramii	ne		
Immunologic  Mast Cell Stabilizer	Cyclosporine  Bepotastine besilate Cromolyn Na	Lodoxamide tromethamine		GO
Nonsteroidal Anti- Inflammatory	Bromfenac Diclofenac Flurbiprofen	Nedocromil Na  Ketorolac Nepafenac		
Otic Preparations Misc.	Antipyrine/Benzocaine Ciprofloxacin Ofloxacin Fluocinolone acetonide Ciprofloxacin HCI/Hydro Ciprofloxacin/Dexameth Neomycin/Polymyxin B/	asone		
Recombinant Human Nerve Growth Factor	Cenegermin	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
Selective VEGF Antagonist	Aflibercept Pegaptanib Na Ranibizumab			
Steroid/ Antibiotic	Bacitracin/Neomycin/Po B/Hydrocortisone Dexamethasone/Tobrar Loteprednol/Tobramycir Neomycin/Polymyxin B/ Neomycin/Polymyxin B/ Sulfacetamide/Predniso	nycin 1 Dexamethasone Hydrocortisone		
	P	hosphodiesterase-5 enzy	me inhibitors	
Phosphodiesterase -5 enzyme inhibitors	Avanafil Sildenafil Tadalafil Vardenafil		Taking for Pulmonary Arterial Hypertension (PAH) indication: Recommend to continue regimen throughout the perioperative period	GO
			Taking for BPH Recommend to coordinate perioperative management plan with anesthesiologist, surgeon, and prescribing provider	$\triangle$

			Taking for other indications: Recommend to hold therapy five days prior to and the day of surgery in all patients	STOP
		Pheochromocyt	oma Agents	
Tyrosine Hydroxylase Inhibitor	Metyrosine		Recommend to coordinate perioperative medication management plan with	$\wedge$
Alpha₁-Blocker	Phenoxybenzamine HC Phentolamine Mesylate		anesthesiologist, surgeon, and prescribing provider	
	F	Renin Angiotensin Sy	stem Antagonists	
Angiotensin Converting Enzyme (ACE) Inhibitors	Benazepril Captopril Cilazapril Enalapril Enalaprilat Fosinopril Lisinopril	Moexipril Perindopril Quinapril Ramipril Trandolapril	Significant Heart Failure (American College of Cardiology Foundation/American Heart Association (ACCF/AHA) heart failure staging system Stage D, or New York Heart Association (NYHA)	<u> </u>
Angiotensin II receptor blockers	Candesartan Losartan	Olmesartan Valsartan	Functional Classification III or IV) or History of High Blood Pressure (systolic ≥180 mmHg or diastolic	
Direct renin inhibitors	Aliskiren		≥120 mHg): Recommend to coordinate perioperative medication management plan with anesthesiologist, prescribing provider	
			For all other indications: Hold for 24 hours prior to surgery and the day of surgery	STOP
Neprilysin inhibitor	Sacubitril		Recommend to coordinate perioperative medication management plan with anesthesiologist, prescribing provider	
Selective Aldosterone Receptor Antagonists	Eplerenone		It is reasonable to continue regimen throughout the perioperative period	GO
		Respiratory	Agents	
Antifibrotic agents	Pirfenidone		Recommend to coordinate perioperative medication management plan with surgeon and prescribing provider	$\triangle$
Arylalkylamine decongestants	Phenylephrine Pseudoephedrine		Recommend to hold therapy the day of surgery	STOP
Inhaled anticholinergics	Aclidinium Ipratropium Revefenacin	Tiotropium Umeclidinium	Recommend to continue regimen throughout the perioperative period and to administer on the morning of surgery	GO
Expectorants	Guaifenesin Potassium iodide		It is reasonable to continue regimen throughout the perioperative period	GO
Inhaled corticosteroids	Beclomethasone Budesonide Ciclesonide	Flunisolide Fluticasone Mometasone	Recommend to continue regimen throughout the perioperative period	GO

Inholod	Albutorol	Levalbuterol	Decommand to continue regimes	
Inhaled	Albuterol		Recommend to continue regimen	
sympathomimetics	Arformoterol	Metaproterenol	throughout the perioperative period	
	Ephedrine	Olodaterol	and to administer on the morning of	
	Epinephrine	Pirbuterol	surgery	
	Formoterol	Salmeterol		
	Indacaterol	Terbutaline		
	Isoproterenol	Vilanterol		
Interleukin-5	Mepolizumab		Recommend to continue regimen	
receptor	Reslizumab		throughout the perioperative period	
antagonists				$(\mathbf{GO})$
Leukotriene	Montelukast	Zileuton	Recommend to continue regimen	
modifiers	Zafirlukast	Zilodion	throughout the perioperative period	
modificio	Zamanaot		and administer on the morning of	$(\mathbf{GO})$
			surgery	
			• •	
Lung surfactants	Beractant	Lucinactant	It is reasonable to continue regimen	
	Calfactant	Poractant	throughout the perioperative period	
				$(\mathbf{GO})$
Monoclonal	Omalizumab		Recommend to continue regimen	
antibodies (IgE	Omanzuman		throughout the perioperative period	
inhibitor)			unoughout the perioperative period	$(\mathbf{GO})$
ii ii iiDitOi )				
Mucolytics	Acetylcysteine	Dornase alfa	Recommend to continue regimen	
			throughout the perioperative period	
				( <b>GO</b> )
Non-narcotic	Benzonatate		It is reasonable to continue regimen	
antitussives	Dextromethorphan		throughout the perioperative period	
anulussives	Dexironieriorphan		unoughout the perioperative period	$(\mathbf{GO})$
PDE-4 inhibitor	Roflumilast		Recommend to continue regimen	
			throughout the perioperative period	(co)
				$(\mathbf{GO})$
Respiratory	Aplha1-proteinase inhit	oitor	Recommend to continue regimen	
enzymes	, pina i proteinase illilla	J	throughout the perioperative period	
3.12y11100			anoughout the perioperative period	$(\mathbf{GO})$
		_		
Tyrosine kinase	Fostamatinib		Recommend to continue regimen	
inhibitor	Nintedanib		throughout the perioperative period	
Yanthina	Aminophylling	Theophylling	Recommend to coordinate	<u> </u>
Xanthine	Aminophylline	Theophylline		$\wedge$
derivatives	Dyphylline		perioperative medication	
			management plan with	
			anesthesiologist, surgeon, and prescribing provider	
			1 01	-
		Sedatives and I		
Sedatives and	Amobarbital	Phenobarbital	Recommend to coordinate	^
hypnotics	Butabarbital	Secobarbital	perioperative medication	
	Pentobarbital		management plan with	
Nonbarbiturate	Chloral hydrate	Suvorexant	anesthesiologist, and prescribing	
sedatives and	Dexmedetomidine	Tasimelteon	provider	
hypnotics	Eszopiclone	Zaleplon		
, p	Lemborexant	Zolpidem		
	Ramelteon			
	amonom		1	

Selective	Serotonin Reuptake Inh	ibitors (SSRIs) & Serotoni	n Norepinephrine Reuptake Inhibitors	(SNRIs)
SSRI	Citalopram Escitalopram Fluoxetine Fluvoxamine Desvenlafaxine	Paroxetine Sertraline Vilazodone Milnacipran	Recommend to coordinate perioperative medication management plan with surgeon, anesthesiologist, and prescribing provider	
	Duloxetine Levomilnacipran	Venlafaxine		
		Skeletal Muscle Rel	axants	
Direct acting	Dantrolene		Recommend to continue regimen throughout the perioperative period	
Centrally acting	Baclofen			
	Carisoprodol Chlorzoxazone Cyclobenzaprine Diazepam	Metaxalone Methocarbamol Orphenadrine Tizanidine	It is reasonable to continue regimen throughout the perioperative period	60
		Tetra-cyclic antidepr	essants	
Tetra-cyclic antidepressants	Maprotiline Mirtazapine		It is reasonable to continue regimen throughout the perioperative period	GO
		Toxins		
Botulinum toxins: Type A	AbobotulinumtoxinA IncobotulinumtoxinA	OnabotulinumtoxinA PrabotulinumtoxinA	It is reasonable to hold 48 hours prior to surgery and not resume until approved by surgeon	STOP
Type B toxin	Rimabotulinum toxin B		approved by eargeon	
		Tri-cyclic antidepre	ssants	
Tricyclic antidepressants	Amitriptyline Amoxapine Clomipramine Desipramine Doxepin	Imipramine Nortriptyline Protriptyline Trimipramine	It is reasonable to continue regimen throughout the perioperative period	GO
	Бохеріп	Vasodilators		
Endothelin	Ambrisentan		Recommend to continue regimen	
Receptor Antagonist	Bosentan Macitentan		throughout the perioperative period	(GO)
Human B-Type Natriuretic Peptide	Nesiritide		Recommend to continue regimen throughout the perioperative period	GO
Nitrates	Amyl Nitrate Isosorbide Dinitrate	Isosorbide Mononitrate Nitroglycerin	Recommend to continue regimen throughout the perioperative period	GO
Peripheral Vasodilators	Hydralazine Isoxsuprine	Minoxidil Papaverine	Recommend to coordinate perioperative medication management plan with surgeon, anesthesiologist and prescribing provider	$\triangle$
Prostanoids	Epoprostenol Iloprost	Selexipag Treprostinil	Recommend to coordinate perioperative medication management plan with surgeon, anesthesiologist and prescribing provider	
Soluble Guanylate Cyclase Stimulator	Riociguat		Recommend to coordinate perioperative medication management plan with surgeon, anesthesiologist and prescribing provider	

Vasopressors	Angiotensin II	Epinephrine	Recommend to coordinate	^
	Dobutamine	Isoproterenol	perioperative medication	
	Dopamine	Norepinephrine	management plan with surgeon,	
	Droxidopa	Phenylephrine	anesthesiologist and prescribing	
	Ephedrine		provider	

