

As far as personal expressions are used in this form, they include women and men alike. (Patient, doctor)

**Tips for the patient:**

These examinations are carried out on a fee-paying basis, as this operation is being done at a private clinic. Please check the costs beforehand with your internal specialist!

We respectfully request the **Test for Operation and Anaesthetic Suitability** for

\_\_\_\_\_ Patient's name \_\_\_\_\_ Date of birth \_\_\_\_\_

- Specialist in Internal Medicine
- Specialist in Anaesthesiology and Intensive Care Medicine
- General Practitioner  
(If examined by your general practitioner, we ask for the **return of the completed form**)

The following findings are essential **in addition** to the surgical / anaesthesia suitability:  
(this must be checked by the surgeon or specialist in anaesthesiology)



- No additional examinations necessary
- Pulmonary X-ray or pulmonary function test
- ECG
- Laboratory tests:
  - Blood count
  - Coagulation ..... PZ(INR), PTT
  - Liver parameters ..... GOT(ALT), GPT(ALT), GammaGT
  - Electrolytes ..... K+, Na+
  - Kidney parameters ..... Creatinine, urea
  - Thyroid parameters ..... TSH, T3, T4
  - Blood sugar
  - HbA1c
  - Hepatitis profile .....  HBV |  HCV
  - HIV

- Additional for operations on the breasts
  - Mammography
  - Mamma sonography
  - Mamma MRI
- Additional requests
  - Cardiac ultrasound
  - Pulmonologist
  - Sonography of the abdominal wall
- Other Checkups:

\_\_\_\_\_ signature anaesthetist \_\_\_\_\_ or \_\_\_\_\_ Dr. Johann Umschaden \_\_\_\_\_

We ask you to submit all of the findings to the Schwarzl Klinik by \_\_\_\_\_  
or to send them to us directly.

For further questions please do not hesitate to contact the Schwarzl Medical Team.

\_\_\_\_\_  
Patient's name

\_\_\_\_\_  
Date of birth

According to the Federal Quality Guideline (BQLL), the following basal examinations are indispensable for preoperative diagnosis for anaesthesia / surgical fitness:

<b>Weight:</b>	<b>Height:</b>	<b>Blood pressure:</b>
<b>Pulse</b> (frequency and rhythm):		
<b>Allergies:</b>		
<b>Auscultation of lung:</b>		<b>Auscultation of the heart:</b>
in case of pulse deficit write ECG strips		
<b>Pupils</b> (Size, light-response, separated and side-by-side):		
<b>Suspected neurological disease</b> Oriented neurological examination		
<b>General clinical inspection:</b>		<b>Ongoing medication:</b>
<b>Cardiovascular resilience (MET / Metabolic Equivalent Threshold):</b> _____ (Enter value, see below)		
<b>Laboratory tests: Blood count, PZ (INR) und PTT obligatory!</b> Incl. Laboratory requests of page 1 or further laboratory examinations (see below).		

Notes for further laboratory examinations in the following disease constellations:		HB or Hk	Leuco	Thrombo	Na	K	(Creat) GEB. kalkulatorisch	PTZ/INR	GPT	Bilirubin	BZ	TSH	FB3/ F4
Heart, lungs	MET <4	X					X						
	Lee-Index ≥3; CCS ≥3	X					X						
Liver	Conspicuous history							X	X	X			
	Cirrhosis	X		X	X	X	X	X	X	X			
Kidney	Conspicuous history	X			X	X	X						
Endocrine system	DM					X	X				X		
	Thyroid dysfunction clinically apparent											X	X
Hematology and Onkology	Known hematological disorder	X	X	X									
	Malignant tumors	X	X	X									
	Ongoing chemotherapy or radiation	X	X	X			X						
Long-term medication	ACE-inhibitors; AT II-antagonists, digitalis, diuretics				X	X	X						
	antidepressants				X	X							
	Corticosteroids				X	X					X		
Type of intervention	Leichter Eingriff												
	Schwerer Eingriff	X		X	X	X	X				X		

MET	Anamnestic Cardiale Belastbarkeit (Erklärung)	CSS/NTA-Klassifikation
1	no stress possible, resting, speech dyspnea	IV
2-3	Moving only in the plane (100-150m without break), minor activities, rapid exercise dyspnea	III
3-4	Load restriction, slow walking, light chores, only 1 floor without interruption	II
4-5	Walking at normal speed, short running distance, 2 floors without break and without limiting dyspnoeae	I
5-10	Sports activities (golf, bowling, dancing)	
>10	Endurance, competitive sports	

In case of a conspicuous examination, we ask you to contact the Schwarzl Klinik or forward the patient to the responsible specialist.

\_\_\_\_\_  
place / date

\_\_\_\_\_  
stamp / signature of doctor