

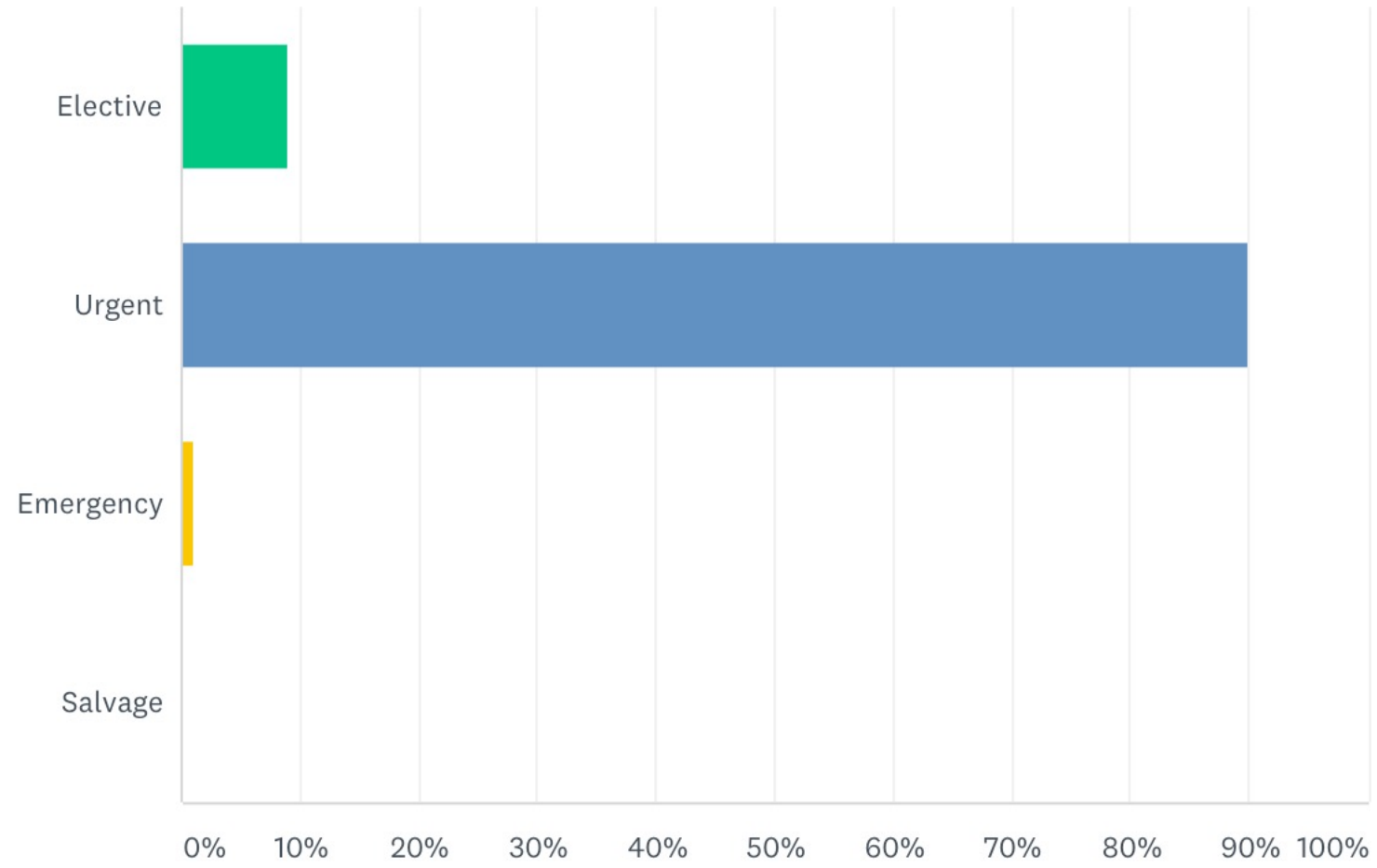
# Classification of Operative Status Survey

100 of 153 responses.

1

73yr old patient has a day case angiogram for angina. Shows tight left main stem stenosis (>50%) and RCA 60% stenosis. Kept in for surgery. Do you classify it as:

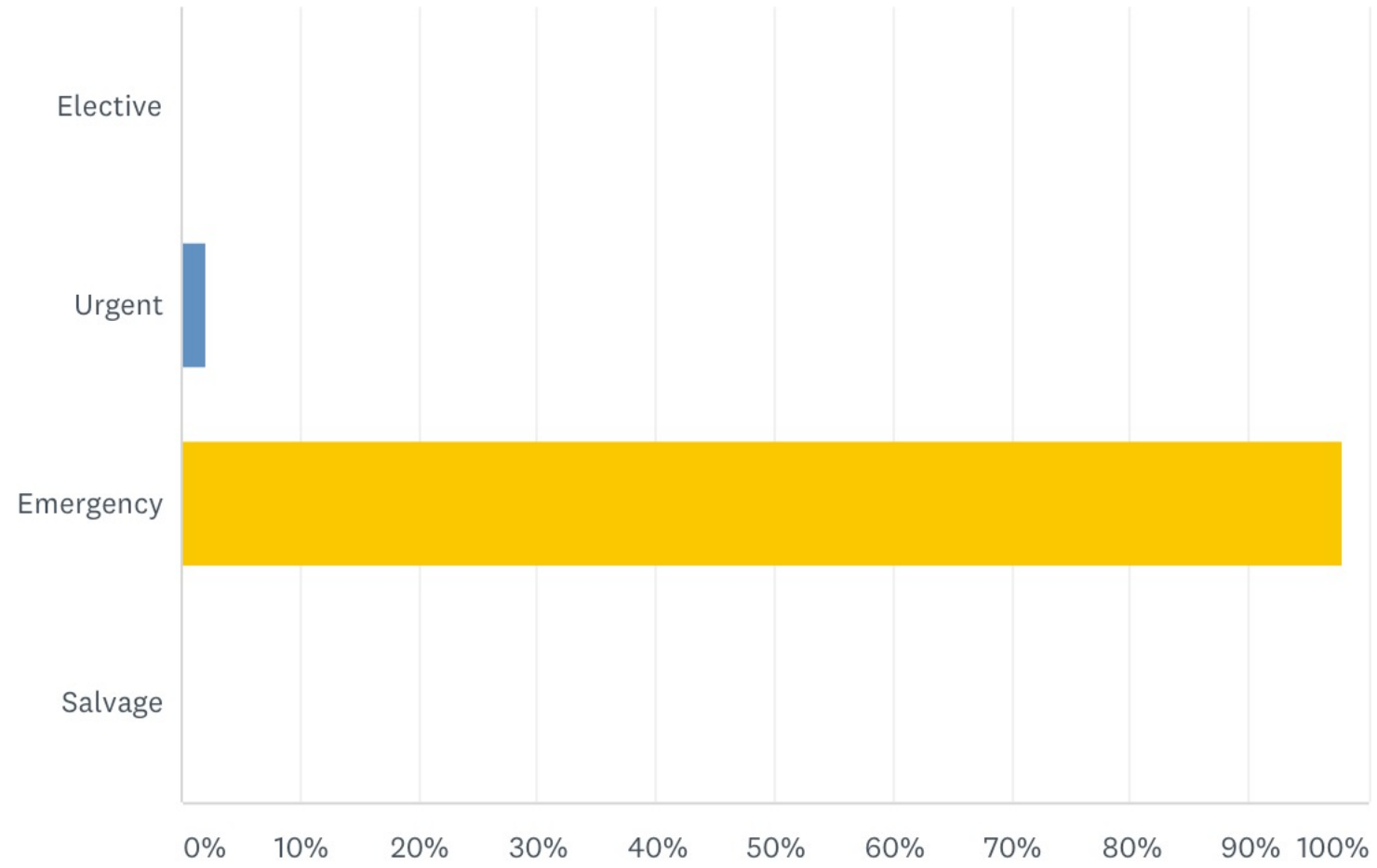
1



2

73yr old patient referred with Type A aortic dissection on a weekday morning. Self-ventilating, warm, stable with urine output. A decision is made to operate immediately on arrival to your unit. Do you classify it as:

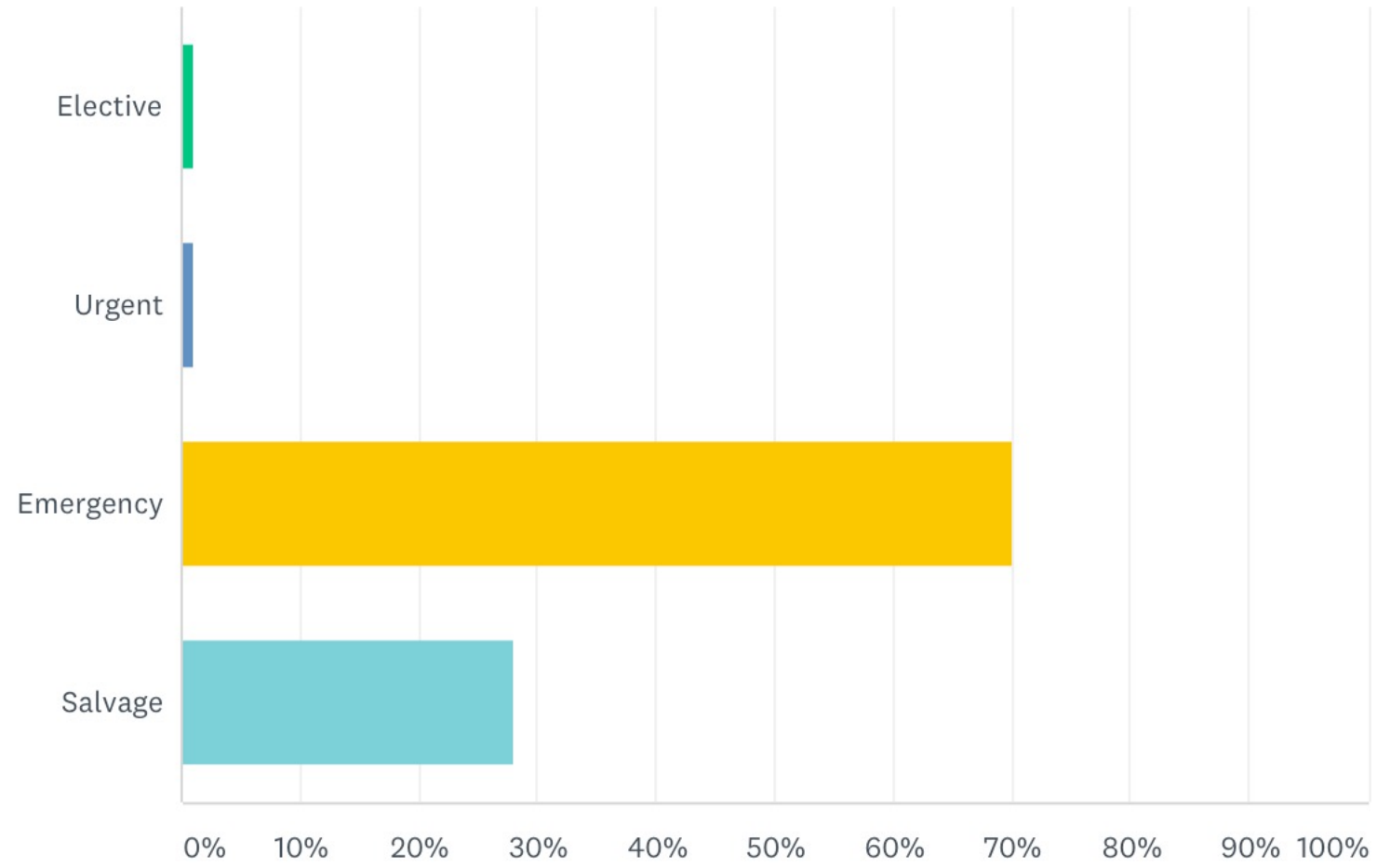
2



# 3

73yr old patient referred with Type A aortic dissection on a weekday morning. Self-ventilating, warm, stable with urine output. Patient deteriorates rapidly on induction. You decide to proceed with surgery. Do you classify it as:

3

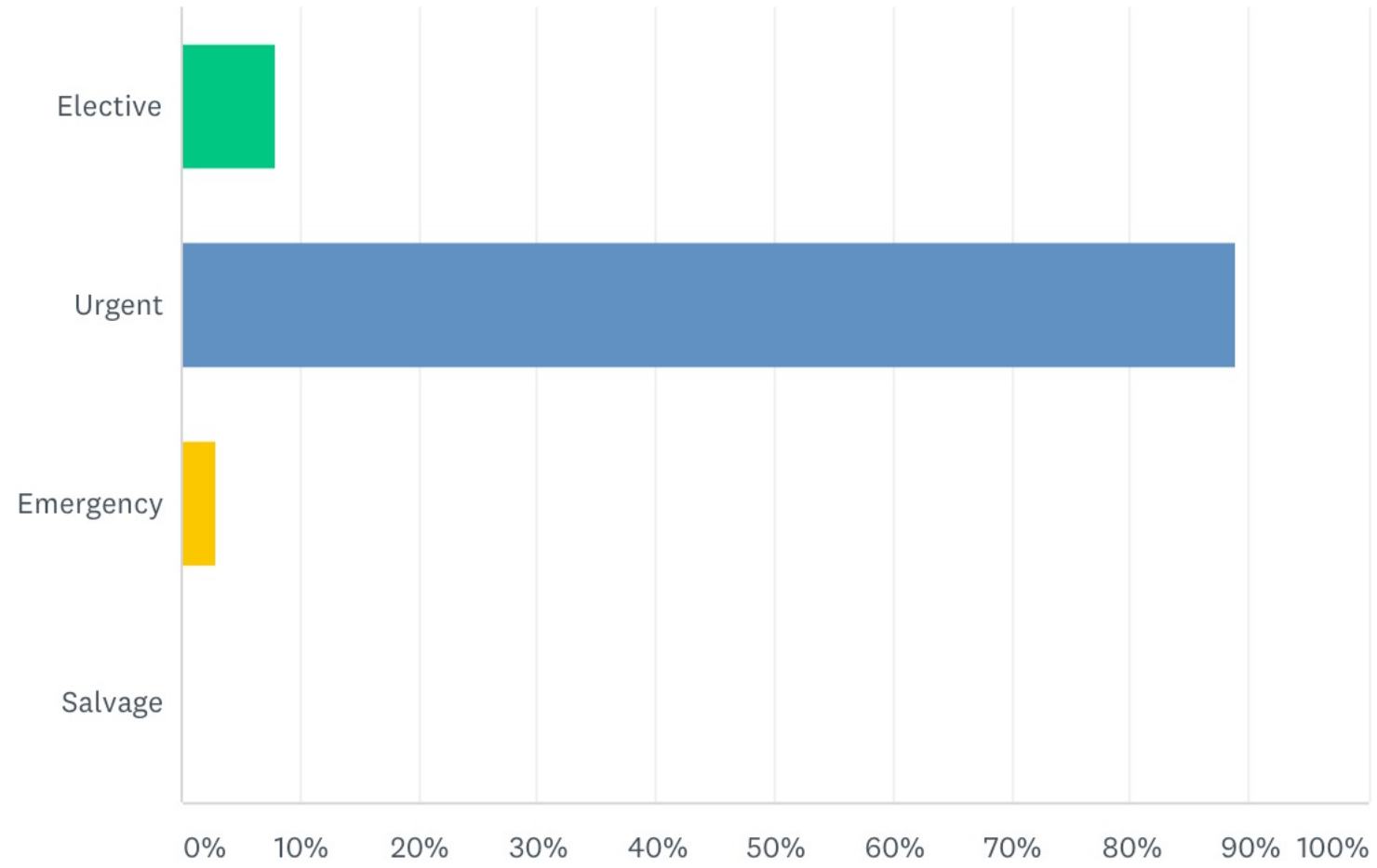


4

73yr old patient awaiting in-patient CABG. Has a single episode of chest pain the night before surgery (stable ECG) and started on intra-venous nitrates. Surgery is performed in the morning as was planned. Do you classify it as:



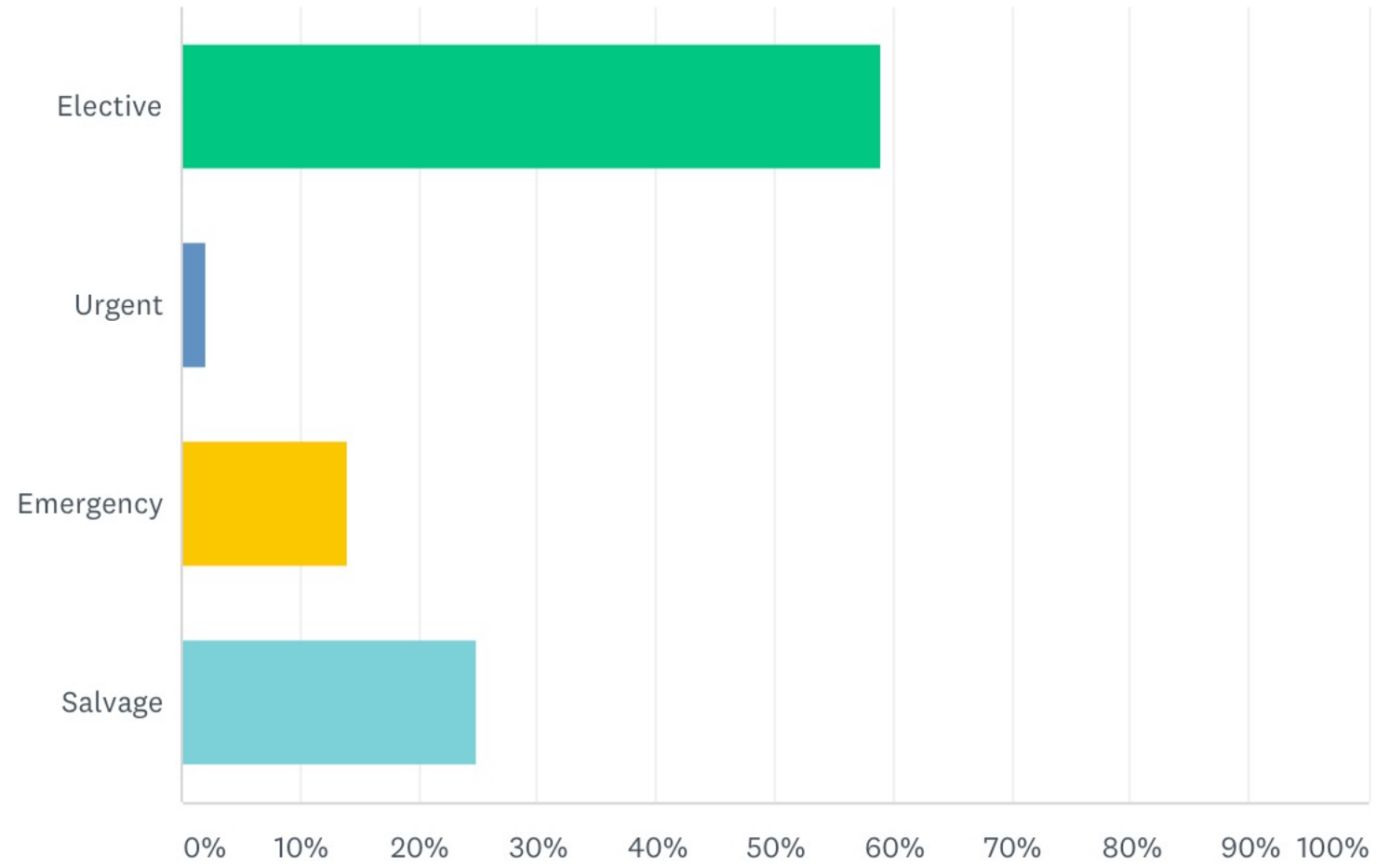
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5

73yr old patient with triple vessel disease admitted for elective CABG. Develops ST elevation and severe hypotension requiring resuscitation in the anaesthetic room. You continue with surgery. Do you classify it as:

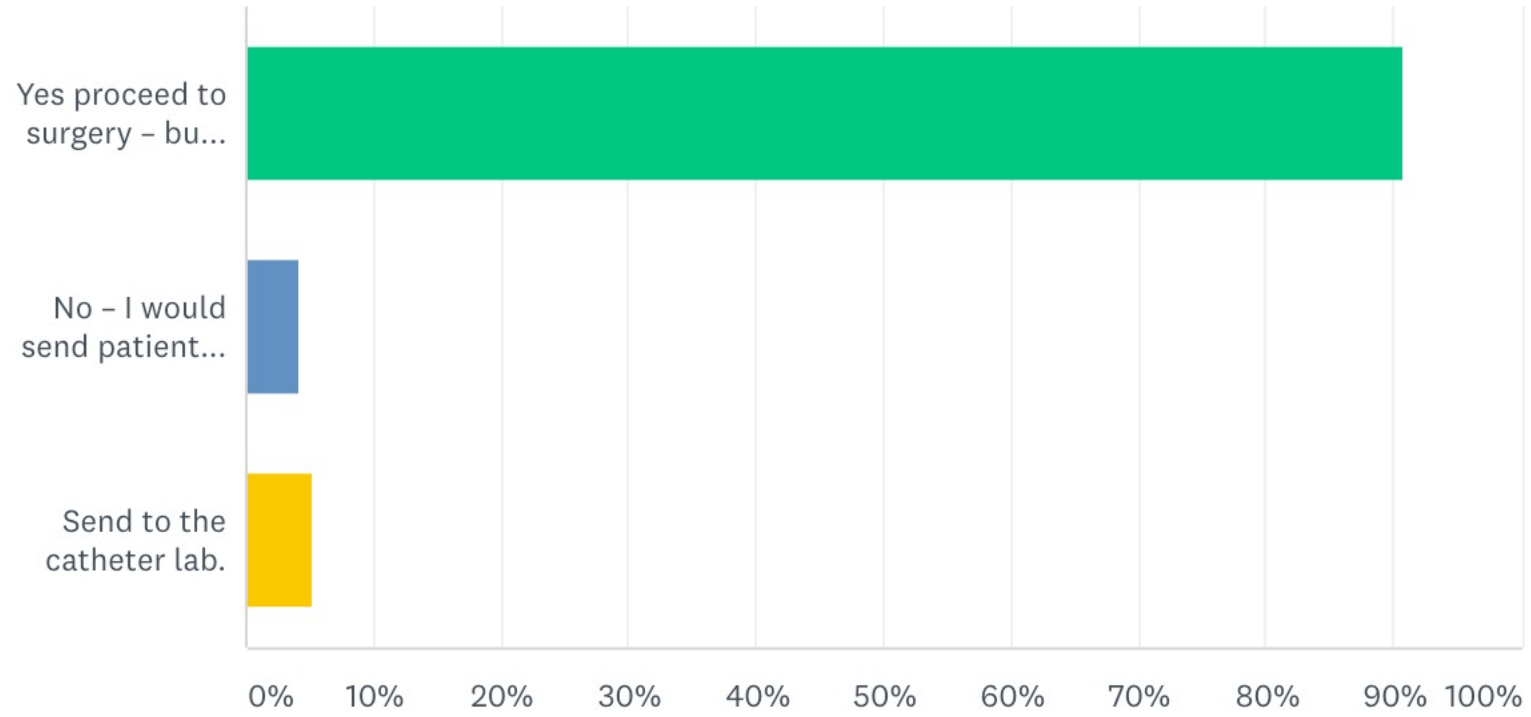
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6

Same patient as in scenario 5, but you have to classify it as 'elective'.  
Would you proceed to surgery or consider other options?

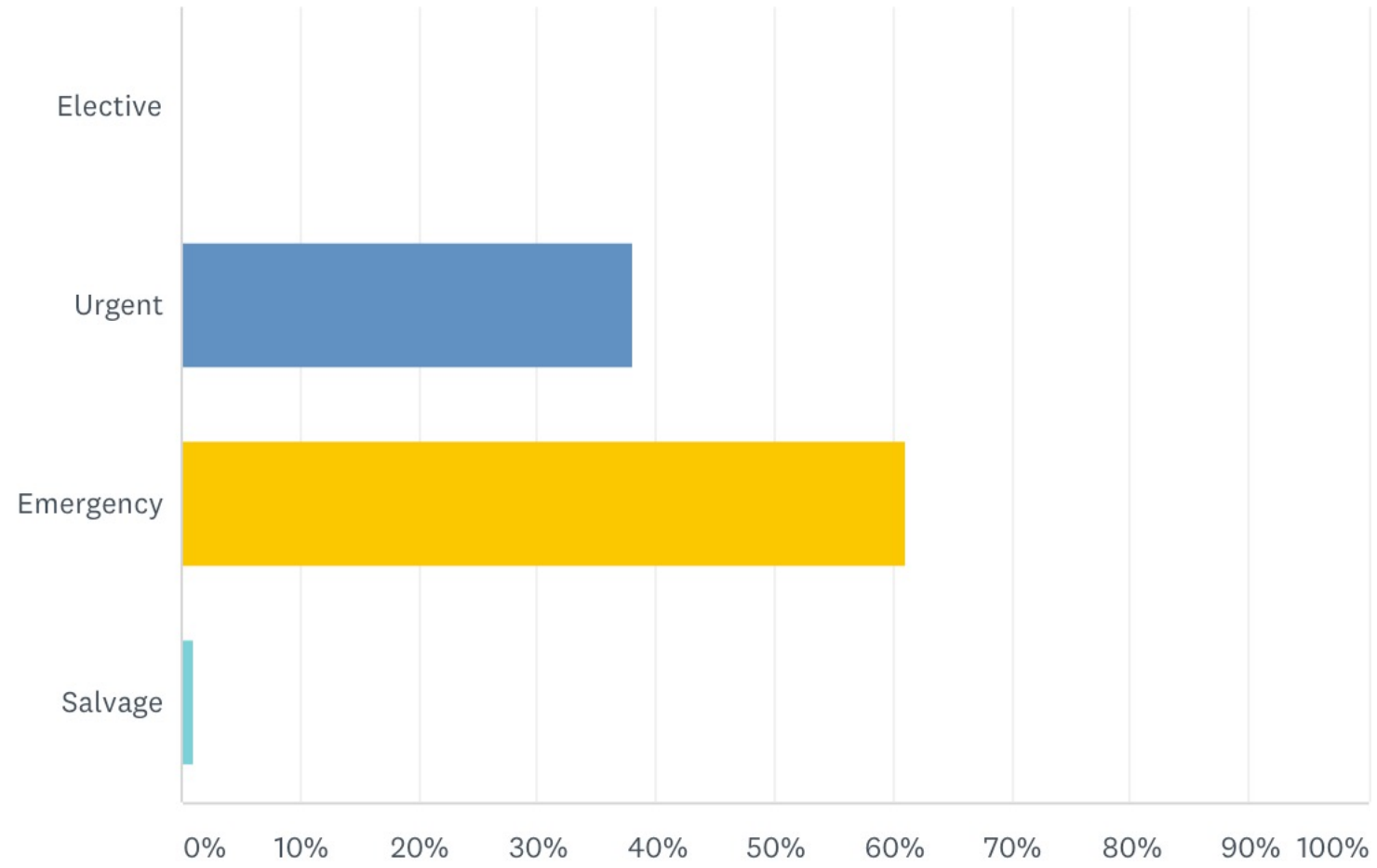
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7

65yr old admitted with ischaemic VSD at midnight. Stable, well perfused and cardiologists have placed an IABP. You plan surgery for the morning. Do you classify it as:

7

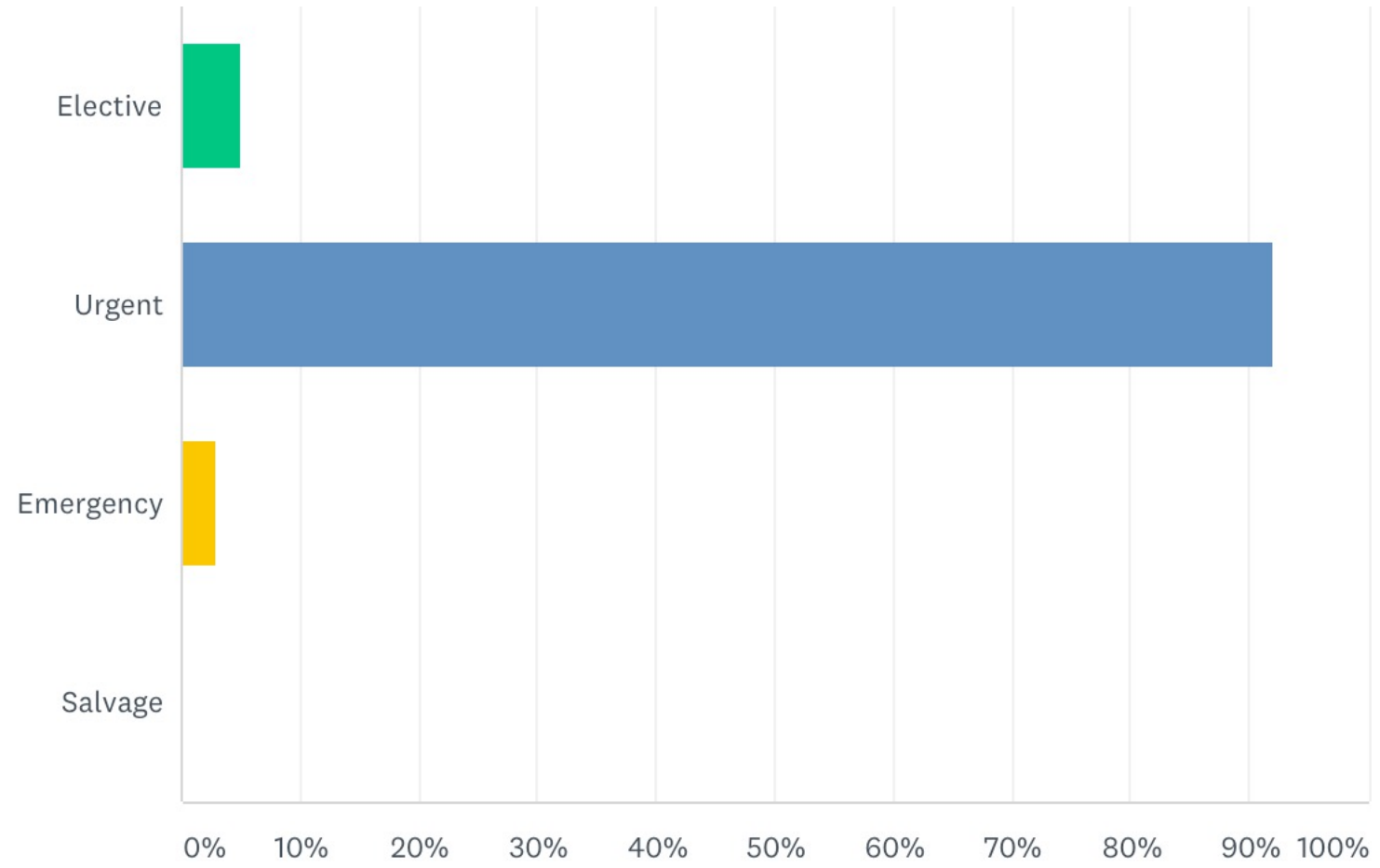


8

65yr old admitted with ischaemic VSD at midnight. Stable, well perfused and cardiologists have placed an IABP. Surgery deferred for 5 days. Do you classify it as:



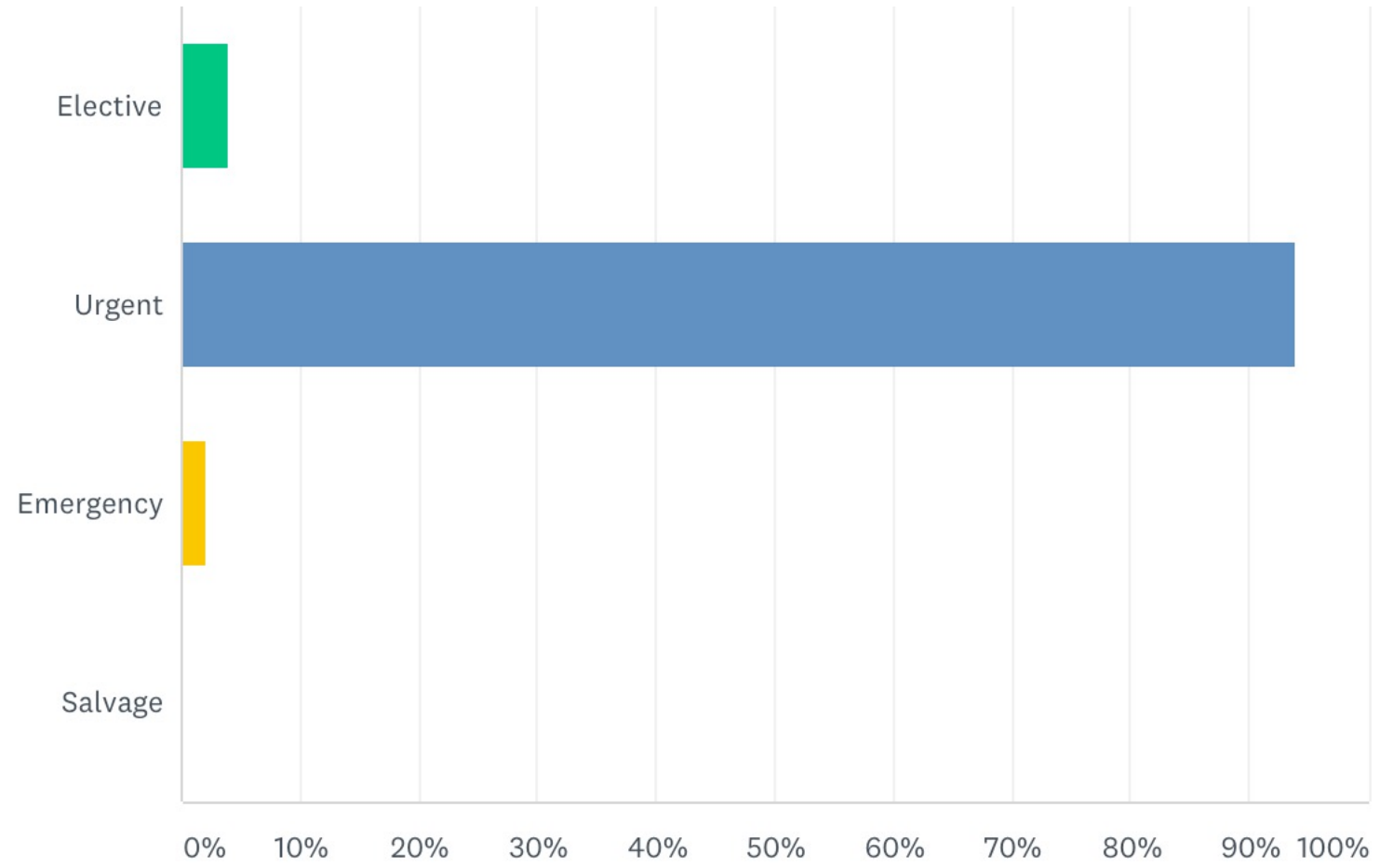
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9

65yr old admitted with aortic valve endocarditis, aortic regurgitation and small vegetation. No embolic symptoms or signs. Good BP and urine output. Admitted on a Friday evening. Decision made to give antibiotics over the weekend and surgery on Monday. Do you classify it as:

9



65yr old admitted with aortic valve endocarditis, aortic regurgitation and small vegetation. No embolic symptoms or signs. Admitted on a Friday evening. Decision made to give antibiotics over the weekend and surgery on Monday. Becomes anuric but surgery still on Monday. Do you classify it as: (also please say how you would classify it if you had to operate over the weekend – choices e-h)

10

