

Anaemia Guideline for patient undergoing elective surgery – Hb <130(male)/120 (female) and EBL >500mls

To avoid unnecessary testing, take FBC in first instance, and can add on anaemia screening the next day, (exception being Fridays when we have to do full screen).

Screening includes;

FBC, iron studies, CRP, ferritin and vit B12/folate.

Types of surgery with an EBL of >500mls are listed below;

Ortho:

- ❖ Total hip or knee replacement
- ❖ Revision surgery to hip or knee
- ❖ Osteotomies

Gen surg:

- ❖ Oesophagectomy
- ❖ Gastrectomy (total or partial)
- ❖ All major colorectal surgery (does not include lap chole, hernia repairs or rectopexy)

Urology:

- ❖ Nephrectomy (partial or total)
- ❖ Cystectomy
- ❖ PCNL
- ❖ TURP

ENT:

- ❖ Any major head and neck procedure including laryngectomy, neck dissection

Gynae:

- ❖ Total abdominal hysterectomy +/- BSO (open or laparoscopic)

Vascular:

- ❖ Open aortic surgery
- ❖ Axillo-femoral or femero-popliteal bypass

Interpretation of Results

Overall, the most common causes of IDA are colorectal and gastric carcinoma and coeliac disease. 2-5% percent of the population have IDA, the incidence in much higher in the surgical population.

