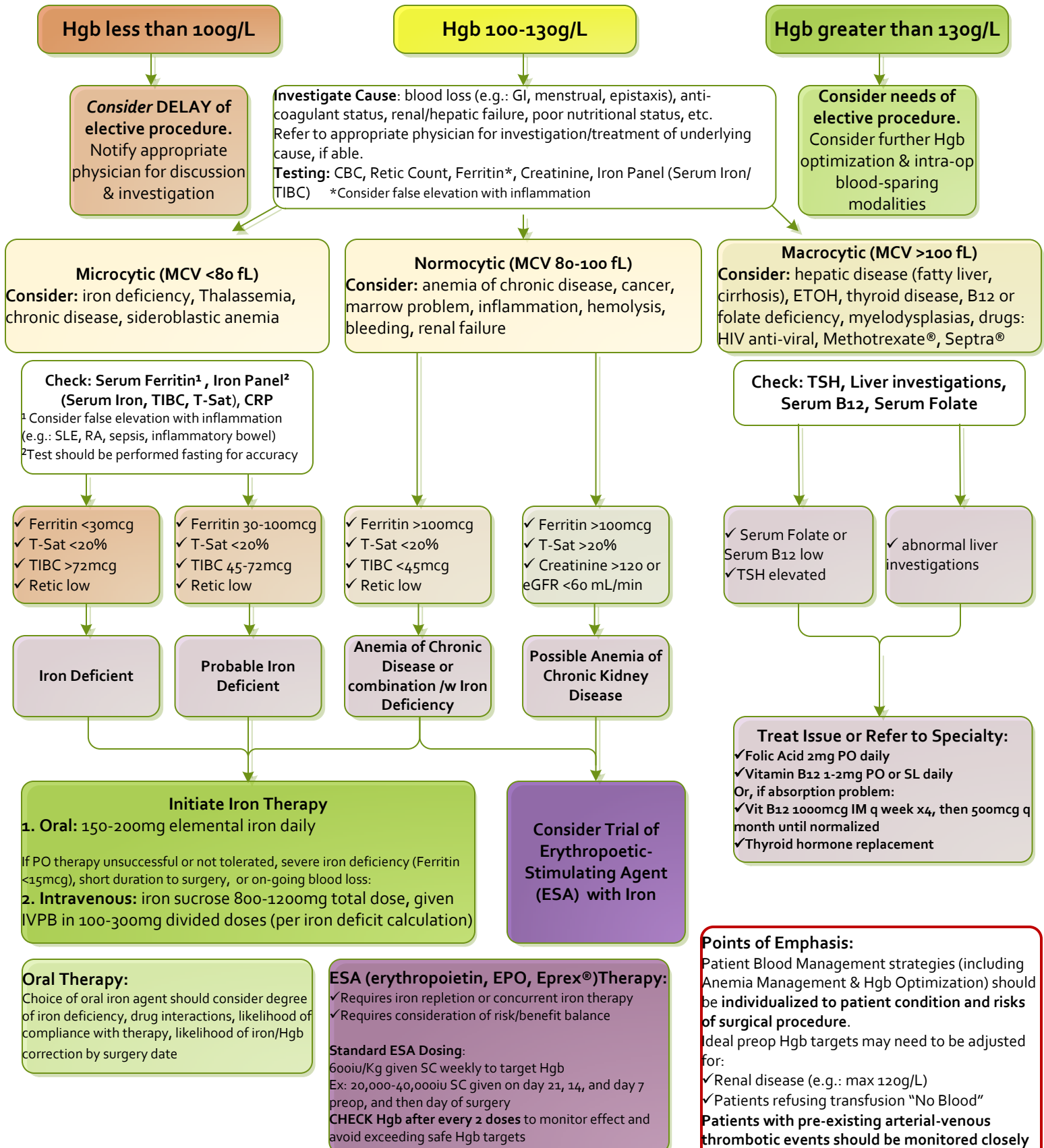


Preoperative Anemia Management & Hemoglobin (Hgb) Optimization

At-Risk Patient Populations: Hgb <130g/L (male or female), weight <65kg, female gender, complex or revision surgery, renal disease, anti-platelet and/or anti-coagulant therapy, hematologic conditions (i.e.: Thalassemia), 'No Blood'/transfusion-refusal

Ideal Timeline for Assessment: Ideally at surgical INTAKE, at time of acceptance for surgery; **at least 30 days preop**



Points of Emphasis:
Patient Blood Management strategies (including Anemia Management & Hgb Optimization) should be **individualized to patient condition and risks of surgical procedure.**
Ideal preop Hgb targets may need to be adjusted for:
✓ Renal disease (e.g.: max 120g/L)
✓ Patients refusing transfusion "No Blood"
Patients with pre-existing arterial-venous thrombotic events should be monitored closely