




**Stayin' Alive in the Office Based Setting**  
Patient Selection and Outcomes for ASA III & IV

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**IS OBA SAFE FOR ASA III & IV?**

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**HOW DO WE GET TO YES SAFELY?**

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**Are there ABSOLUTE CONTRAINDICATIONS to OBA?**

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**HISTORICAL CONTRAINDICATIONS:**

- BMI
- Age or minimum weight
- ASA Classifications
- Malignant Hyperthermia
- Pseudocholinesterase Deficiency
- DNR
- Pacemaker / ICD
- LVAD
- Adult Congenital Cardiac Anomaly
- Home O2
- Obstructive Sleep Apnea
- Known Difficult Airway

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**Critical Conclusion IARS 2017:**

- Safety analysis of 48 patients requiring minimally invasive oropharyngeal surgery between 2011-2015
- IV Sedation to loss of consciousness supplemented with local anesthetic in the office-based setting
- Same Board-Certified MDA and 3 Board Certified OMF surgeons
- No post-op complications reported

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## How did we get here?

Proper Prior Preparation  
Prevents  
Pitifully Poor Performance

Team is everything!

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### PAINSTAKING PRE-OPERATIVE EVALUATION:

- 100% of pediatric and ASA III & IV cases reviewed by provider
- Coordination of care between specialists
- Review of medical records and current medications
- Physical and mental status examination
- Informed consent with patient and family
- Communicate expectations clearly

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### Pushing the Limits

- BMI
- Age or Minimum Weight
- ASA Classifications

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### BROKEN HEARTS CLUB

- Pacemaker
- Defibrillator
- DNR
- LVAD
- Adult Congenital Heart Disease

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**PULMONARY CHALLENGES:**

- Home Oxygen Therapy
- Known Difficult Airway
- Obstructive Sleep Apnea



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**HOT TOPICS OF DEBATE:**

- Malignant Hyperthermia
- Pseudocholinesterase Deficiency



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**ABSOLUTE CONTRAINDICATIONS TO OBA?**

- Unstable Coronary Artery Disease
- RECENT MI or STINT placement
- Poorly Compensated Pulmonary HTN
- Chronic Unstable Medical Conditions
- Coagulopathy requiring transfusion
- Severe Uncontrolled Asthma



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**State of the art monitoring allows for careful perioperative management.**



Bluetooth Precordial Stethoscope

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**HOW TO GET TO YES SAFELY:**

1. Personalized, customized, dynamic care
2. Understanding the pathophysiology unique to each patient
3. Maximizing the patient's health pre-operatively

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Wellness and sustainability compliment each other.  
**GO GREEN!**

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Thanks for your time!  
Comments, questions, concerns?

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