

Normal Risk

- Healthy with no comorbidity, or
- Well controlled disease(s) with no end organ damage

AND

- No functional limitation (able to walk up 3 flights of stairs without stopping) *
- BMI <30
- Age <85 years

Examples include (but are not limited to)

- Cardiovascular
 - hypertension
 - ischaemic heart disease – stable, no angina
 - mild (asymptomatic) valve disease without anticoagulation
 - asymptomatic arrhythmia (PAC, unifocal PVC, 1st degree HB)
- Endocrine
 - non-insulin dependent diabetes
 - hyperlipidaemia on treatment
 - thyroid replacement therapy
- Respiratory
 - asthma
 - previous TB (treatment completed)
- Hepatitis carrier / fatty liver with normal liver function / gallstones
- Epilepsy

**Or equivalent e.g. in patients with mechanical limitation such as arthritis*

Intermediate Risk

- Significant systemic disease under control with treatment and/or mild decompensation

AND

- Functional limitation (able to walk up 1-2 flights of stairs without stopping) *
- BMI <35

Examples include (but are not limited to)

- Cardiovascular
 - Ischaemic heart disease (stable angina) / myocardial infarction (MI)
 - Heart failure
 - Symptomatic arrhythmia (e.g. AF, WPW, 2 / 3 degree HB, SSS, ICD/PM)
 - Anticoagulation (not requiring bridge therapy)
 - Previous PCI on antiplatelet therapy
 - Previous DVT / PTE
- Endocrine
 - Poorly controlled or insulin dependent diabetes
 - Cushing's disease / steroid dependency
 - Conn's / acromegaly / Addison's
- Respiratory (all non-oxygen dependent)
 - Poorly controlled asthma
 - COPD
 - Bronchiectasis
 - Restrictive pulmonary disease / pulmonary fibrosis
 - Obstructive sleep apnoea requiring CPAP
 - Kyphoscoliosis
- Renal impairment requiring dialysis
- Liver disease with mild signs of decompensation
- Nervous system
 - Neuromuscular diseases, Parkinsonism, myasthenia gravis
- Difficult airway e.g. post radiotherapy, anatomical/mechanical abnormality

**Or equivalent e.g. in patients with mechanical limitation such as arthritis*

High Risk

- Potentially life-threatening systemic disease (life threatening conditions are the main criteria) where likelihood of unexpected HDU/ICU post operatively is probable
- Severe frailty: Completely dependent for personal care, from whatever cause (physical or cognitive)
- BMI ≥ 35
- Re-operation in the same cavity e.g. redo joint replacement

Examples include (but are not limited to)

- Potentially life-threatening systemic disease (life threatening conditions are the main criteria)
 - Decompensated heart failure, HOCM, severe valvular disease,
 - Severe, decompensated liver diseases with evidence of oesophageal varices, hypersplenism, ascites and or coagulopathy.
 - Severe lung disease - oxygen dependent and/or dyspnoea at rest
 - Morbid obesity with BMI ≥ 35
 - SBP of ≥ 180 mmHg or DBP of ≥ 110 mmHg
- Recent CVA, TIA, MI (within past 3 months)
- PCI
 - Within 14 days of balloon angioplasty
 - Within 30 days after of bare metal stent (BMS) implantation
 - Within 6 months after drug eluting stent (DES) implantation
- Severe frailty: Completely dependent for personal care, from whatever cause (physical or cognitive) in those older than 65 years of age.
- Bleeding diathesis
- Pregnancy (unless TOP) Note Maternity packages are excluded from classification system
- Terminally ill patients
- If patients are likely to require HDU/ICU post operatively that is not specified in the package inclusions, this would be considered a High Risk case