# Summary

The goals of preoperative assessment of patients are to reduce the morbidity of surgery, to increase quality but decrease the cost of preoperative care and to return the patient to desirable functioning as quickly as possible.

As many as one third of surgical patients have significant coronary artery disease so the initial history, physical examination and electrocardiogram should focus on identification of potentially serious cardiac disorders including coronary artery disease, heart failure, symptomatic arrhythmias, presence of pacemaker or history of orthostatic intolerance.

Greater degrees of preoperative pulmonary complications are associated with more marked intraoperative alterations in respiratory functions and postoperative complications which include pneumonia, bronchitis, bronchospasm, respiratory failure and mechanical ventilation.

Patients with end stage liver disease are at high risk of major complications and death following surgery, effects from anesthesia and surgery can cause further hepatic decompensation leading to hepatic failure.

Renal failure is frequently associated with a postoperative complication or trauma. Optimal preoperative assessment is dependent on preoperative dialysis, hemodialysis is more effective than peritoneal dialysis .

Endocrinal diseases including; diabetes mellitus , thyroid diseases , parathyroid diseases and hypothalamic-pituitary-adrenal disorders should be well controlled preoperatively.

Patients with neurological diseases such as; cerebrovascular stroke, tumors or neuromuscular disorders should undergo good preoperative assessment to avoid any intraoperative or postoperative complications.

There are many hematological diseases including; anemias, hemoglobin disorders and coagulopathies that should be detected and treated preoperatively to avoid any perioperative morbidity if not recognized.

The management of patient's usual medications in the preoperative period is often a difficult problem; the physician should focus on the patient response to the stresses of surgery, patient's underlying diseases and degree of control afforded by ongoing treatment.

The role of medical consultant is to identify and evaluate the patient's current medical status, produce clinical risk profile, decide whether test's to be done prior to surgery and optimize the patient's medical condition to reduce risk of complication.