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 Abstracttitel: Perioperative evaluation and modification of cardiac risk in patients with cardiovascular disease undergoing noncardiac surgery – current practice in Bavaria

Background and objective: The clinical use of guidelines for the management of patients with coronary artery disease undergoing noncardiac surgery is unknown. For that reason we evaluated the current practice among Bavarian anaesthetists

Methods: All 118 Departments of Anaesthesiology at Bavarian hospitals were invited by mail to hand out a structured questionnaire to each of their anaesthetists.

Results: 421 anaesthesiologists (43% residents (RES), 57% consultants (CON) of 42 hospitals (Hospitals of primary care (PC) 48%; and of specialized and maximum care (SMC) 52%) returned questionnaires (36% response rate).

Total (n=421)		PC/SMC	RES/CON
Guideline implemented	(n=140) 33%	30/34%	35/31%
Perioperative administration of beta-blockers	(n=420) 99%	100/99%	99/100%
Preoperative cardiac testing	(n=262) 62%	73/57%*	70/58%*
Systematic screening for perioperative myocardial infarction	(n=107) 25%	25/27%	31/22%

Conclusions: There is substantial variability among anaesthetists and hospitals concerning the management of high risk patients undergoing noncardiac surgery. Residents and hospitals for primary health care more commonly require cardiologic consultation and cardiac testing which reflects in part the absence of any clear-cut guidelines. Complications like myocardial infarction are not systematically monitored; Overall knowledge about perioperative care was generally lower than expected. In conclusion, we need further education and the implementation of standards which are easy to handle and available at bedside.