

2/19/26 Update:

## **GLP-1 Patient Management**

Some examples are but not limited to: Ozempic, Wegovy, Mounjaro, Trulicity, Bydureon, Byetta, Saxenda, Victoza, Adlyxin, Rybelsus

**If a patient has taken GLP1 in the last 30 days, these NPO guidelines need to be followed:**

### ***Pre-Op Management:***

- For **DAILY** dosing patients, (oral or injectable) hold for 48 hours prior to procedure.
- For **WEEKLY** dosing patients, hold for a FULL 7-days prior to surgery.
  - If GLP-1 agonists prescribed for diabetes management are held for longer than the dosing schedule, consult an endocrinologist for bridging the antidiabetic therapy to avoid hyperglycemia.

### ***Day Prior to Surgery***

- **ONLY LIQUIDS (No solid food) after 12 noon the day before surgery.**

### ***AFTER MIDNIGHT Day of Surgery***

- **NO LIQUIDS** (ie: nothing at all by mouth)
  - For diabetic patients, check blood sugars the night before surgery
    - If <100, patients may drink 4 oz of clear liquids (apple juice, ginger ale, etc.)
- Alert Anesthesia for symptoms of nausea or vomiting

**If instructions are not followed as stated above, the SURGERY WILL BE CANCELLED at the discretion of the anesthesiologist**

### ***Day of Procedure:***

- If GI symptoms (severe nausea/vomiting/retching, abdominal bloating, or abdominal pain) are present, consider delaying elective procedure. Discuss the risk of regurgitation and aspiration with the proceduralist/surgeon and the patient.
- If the patient has *no* GI symptoms, but GLP-1 agonists were **not** held, proceed with 'full stomach' precautions or consider delaying the procedure. Discuss the concerns of potential risk of regurgitation and aspiration with the proceduralist/surgeon and the patient.

**If a patient has not taken GLP1 in the last 30 days, then standard NPO guidelines must be followed.**

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Approved by: Michael Silber, DO      Chairman, Department of Anesthesia