

ASA PHYSICAL STATUS CLASSIFICATION SYSTEM*

ASA I

Patients are considered to be normal and healthy. Patients are able to walk up one flight of stairs or two level city blocks without distress. Little or no anxiety. Little or no risk. This classification represents a "green flag" for treatment.

ASA II

Patients have mild to moderate systemic disease or are healthy ASA I patients who demonstrate a more extreme anxiety and fear towards surgery. Patients are able to walk up one flight of stairs or two level city blocks, but will have to stop after completion of the exercise because of distress. Minimal risk during treatment. This classification represents a "yellow flag" for treatment. Examples: well-controlled non-insulin controlled diabetes, epilepsy, asthma, and/or thyroid conditions; ASA I with a respiratory condition, pregnancy, and/or active allergies.

ASA III

Patients have severe systemic disease that limits activity, but is not incapacitating. Patients are able to walk up one flight of stairs or two level city blocks, but will have to stop enroute because of distress. If surgery is indicated, stress reduction protocol and other treatment modifications are indicated. This classification represents a "yellow flag" for treatment.

Examples: angina pectoris, myocardial infarction or cerebrovascular accident history, insulin dependent diabetes, congestive heart failure, chronic obstructive pulmonary disease.

ASA IV

Patients have severe systemic disease that limits activity and is a constant threat to life. Patients are unable to walk up one flight of stairs or two level city block. Distress is present even at rest. Patients pose significant risk since patients in this category have a severe medical problem of greater importance to the patient than the planned surgery. This classification represents a "red flag" - a warning flag indicating that the risk involved in treating the patient is too great to allow elective care to proceed.

Examples: unstable angina pectoris, myocardial infarction or cerebrovascular accident within the last six months, high blood pressure, severe congestive heart failure or chronic obstructive pulmonary disease, uncontrolled epilepsy, diabetes, or thyroid condition.

ASA V

Patients are moribund and are not expected to survive more than 24 hours with or without an operation. These patients are almost always hospitalized, terminally ill patients. Emergency care, in the realm of palliative treatment may be necessary. .

ASA VI

Clinically dead patients being maintained for harvesting of organs.

ASA-E: Emergency operation of any variety (used to modify one of the above classifications, i.e., ASA III-E).

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