



## APPENDIX 2

### American Society of Anesthesiologists' Physical Status Classification System

#### Current Definitions and ASA-Approved Examples

ASA PS	Definition	Adult Examples, including but not Limited to:	Pediatric Examples, including but not Limited to:	Obstetric Examples, including but not Limited to:
ASA I	A normal healthy patient	Healthy, non-smoking, no or minimal alcohol use.	Healthy (no acute or chronic disease), normal BMI percentile for age.	
ASA II	A patient with mild systemic disease.	Mild diseases only without substantive functional limitations. Current smoker. social alcohol drinker, pregnancy, obesity (30<BMI<40), well controlled DM/HTN, mild lung disease.	Asymptomatic congenital cardiac disease, well controlled. Dysrhythmias, asthma without exacerbation, well controlled. epilepsy, non-insulin dependent DM, abnormal BMI percentile. for age, mild/moderate OSA, oncologic state in remission, autism with mild limitations.	Normal pregnancy*, well controlled gestational HTN, controlled preeclampsia without severe features, diet-controlled gestational DM.
ASA III	A patient with severe systemic disease	Substantive functional limitations, One or more moderate to severe diseases. Poorly controlled DM, HTN, COPD, morbid obesity (BMI >=40), active hepatitis, alcohol abuse, implanted pacemaker, moderate reduction	Uncorrected stable congenital cardiac abnormality, asthma with exacerbation, poorly controlled epilepsy, insulin dependent DM, morbid obesity, malnutrition, severe OSA, oncologic state, renal failure, muscular dystrophy, CF, organ transplantation, brain/spinal cord malfunction, symptomatic hydrocephalus,	Preeclampsia with severe features, gestational DM with complications or high insulin requirements, a thrombophilic disease requiring anticoagulation.

ejection fraction, ESRD on dialysis, history (> 3 months) MI, CVA, TIA or CAD/stents.

premature infant PCA <60 weeks, autism with severe limitations, metabolic disease, difficult airway, long term TPN. Full term infants <6 weeks of gestational age.

ASA IV	A patient with severe systemic disease that is a constant threat to life	Recent (<3 months) MI, CVA,TIA, or CAD/stents, ongoing cardiac ischemia or severe valve dysfunction, severe reduction of ejection fraction, shock, sepsis, DIC, ARD or ESRD not on dialysis.	Symptomatic congenital cardiac abnormality, congestive heart failure, active sequelae of prematurity, acute hypoxic ischemic encephalopathy, shock, sepsis, DIC, automatic implantable cardioverter-defibrillator, ventilator dependence, endocrinopathy, severe trauma, severe respiratory distress, advanced oncologic state.	Preeclampsia with severe features complicated by HELLP or other adverse event, peripartum cardiomyopathy with EF <40%, uncorrected/decompensated heart disease acquired or congenital.
ASA V	A moribund patient who is not expected to survive without the operation	Ruptured abdominal/thoracic aneurysm, massive trauma, intracranial bleed with mass effect, ischemic bowel in face of. significant cardiac pathology or multiple organ/system dysfunction.	Massive trauma, intracranial bleed with mass effect, patient requiring ECMO, respiratory failure or arrest, malignant hypertension, decompensated congestive heart failure, hepatic encephalopathy, ischemic bowel or multiple organ/system dysfunction.	Uterine rupture.
ASA VI	A declared brain dead patient whose organs are being removed for donor purposes			

\* Although pregnancy is not a disease, the parturient's physiologic state is significantly altered from when the woman is not pregnant, hence the assignment of ASA II for a woman with an uncomplicated pregnancy

\*\* The addition of 'E' denotes Emergency surgery: (An emergency is defined as existing when delay in treatment of the patient would lead to a significant increase in the threat to life or body part).

REPRODUCED WITH PERMISSION (2024) FROM THE AMERICAN SOCIETY OF ANESTHESIOLOGISTS