

Your Surgery

Before Surgery Before going into the surgical area, you may be given a sedative to relax you. In the operating room, the anesthesiologist will insert an intravenous (IV) line into your arm. In order to monitor your vital signs and your body's response to the anesthetic, monitoring devices will be attached to you (i.e. blood pressure cuff and electrodes on your chest to monitor your heart). The anesthetic will then be administered, either by injecting the drug through the intravenous line or by gas through a face mask.

During Surgery During the surgical procedure, anesthetic will be given to you continuously so that you are not aware of anything around you. Your anesthesiologist will stay with you during the operation and closely monitor all of your important bodily functions, such as blood pressure, pulse, breathing and temperature. Should a complication occur, your anesthesiologist is prepared to respond immediately.

After Surgery After the procedure, the anesthetic will be reversed and you will be taken to the recovery room where the trained nursing staff will care for you while you regain consciousness. Your pulse, blood pressure, breathing and temperature will be closely monitored and you will be given an oxygen mask and pain medication to control any discomfort you may be experiencing. You will be discharged only when you are fully recovered and your pain is controlled.

Recovering from Anesthetic

Some pain or discomfort from surgery is common. Some of the possible effects you may experience from general anesthetic are dry throat, nausea, vomiting, sore jaw, sore muscles, and even short-term memory loss, but these are only temporary. It is important however, not to drive or operate heavy machinery for 24 hours following your surgery. As such, you will have to arrange for a friend or family member to take you home and stay with you overnight.

Are there risks?

Although serious complications are rare, all operations and anesthetic carry with them a possible risk; however, the risks involved depend on the seriousness of the surgery and your overall state of health. Your anesthesiologist will discuss in detail any risks that are specific to you and will take every precaution to protect you from them.

Ensuring Safety in Anesthesia

Anesthesiologists continue to educate themselves and update their medical skills. As a group, they remain continually committed to providing the highest standard of care by working with university departments, professional organizations, government agencies and the pharmaceutical industry. Thanks to the efforts of all those in the field, modern anesthesia continues to evolve in terms of its effectiveness and safety. At Southlake Regional Health Centre this is our commitment to you!

Visit our website:

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Anesthesia

And

YOU

This pamphlet has been created to explain to you what anesthesia is and how it plays a role in your operation or procedure.



Anesthesia And YOU

As a patient, you are an important member of your health care team. It is therefore hoped that this information will help you better understand your anesthetic care, encourage you to ask questions and help you to have an informed discussion with your doctor (anesthesiologist) prior to your operation.

What is Anesthesia?

Anesthesia is the medical specialty that uses drugs and/or gases to numb various parts of the body or to create a state of “deep sleep”. Anesthesia is meant to safely take you through your surgery and remove most or all of the pain.

Your Anesthesiologist

Anesthesiologists are fully trained medical doctors (MD) who have spent many years receiving specialized training in the use of anesthetic drugs. Your anesthesiologist has an extensive knowledge of medical illness, drug administration and the use of highly technical equipment to administer and monitor your anesthetic.

Your anesthesiologist will carefully render you unconscious and/or insensitive to pain during the surgery. He/she will be present throughout your operation to observe all of your vital signs, such as pulse, breathing and blood pressure, and constantly monitor your body’s response to the surgery and anesthesia. Should a critical situation arise, your anesthesiologist is highly qualified to respond appropriately and immediately.

In addition to working in the operating room, anesthesiologists work in pain clinics, obstetrical units and intensive care units.

Preparing for your Anesthesia

Preparation for anesthesia depends on the type of medical procedure you are having done. It is **extremely** important that you follow the directions your doctor gives you, as they are necessary precautions for your own health and safety. If your doctor’s instructions are not followed exactly, your surgery may have to be postponed.

In addition to any specific instructions your doctor gives you, you will not be permitted to eat past midnight the night before your surgery, and you will only be permitted clear fluids up until three hours before your surgery is scheduled to begin. Having an empty stomach will reduce the possibility of vomiting.

Meeting your Anesthesiologist

Before your operation, an anesthesiologist will meet with you. This is the time to discuss your medical history and any questions or concerns you may have regarding the procedure and your stay in hospital. It is crucial for you to answer all questions **completely** and **honestly**, as your anesthesiologist will use the information to plan an appropriate anesthetic for you. Some of the information your anesthesiologist will want from you will include reactions to drugs or previous anesthetics, prescription or over-the-counter medications, any street drugs (i.e. marijuana, ecstasy) you may have used, and any herbal supplements you may be taking.

Selecting the proper anesthetic

Depending on your surgery, your anesthesiologist will decide which anesthetic is best suited for you. The decision will be based on your medical history, physical examination, and the results of your lab tests. You can often participate in this decision.

Anesthetic Options

Local Anesthesia is produced by injecting a specific part of your body with a drug that numbs the area for surgery. This type of anesthesia is used for stitching up superficial cuts and removing skin growths.

Regional Anesthesia is used for more extensive procedures. It consists of an injection near a cluster of nerves to numb a larger area of the body. This is called a nerve block. During this type of anesthesia, you may remain awake or in a light sleep if you receive a sedative. The surgical site will be covered so you will not see or feel the surgery.

Epidural and Spinal Anesthesia can both be used for operations involving abdomen, bladder, prostate, and lower limbs.

An epidural is an injection into the back, just outside the sac containing the spinal cord and fluid. It is generally used for longer procedures where there is a need to re-inject drugs. An epidural typically involves the insertion of a small tube (catheter) into the back where it remains for the duration of the procedure and, in some cases, following the procedure so that pain medication can be administered.

Spinal anesthesia is injected through a small needle directly into the fluid-filled space surrounding the spinal cord.

General Anesthesia is the method people most often associate with the operating room. Using this type of method, anesthesia may be administered through a face mask or intravenous (IV) injection. The anesthetic enters the blood stream and travels to the brain, allowing you to fall into a state of deep sleep. Additional drugs are then administered to prevent pain, maintain deep sleep, relax the muscles and help the surgeon perform the operation.