Anesthesia (local anesthetic, pain relief and general anesthetic)

The treatment

Anesthesia is another word for local anesthesia, sedation or general anesthesia. The anesthesiologist is responsible for your anesthesia. Together with a specially trained anesthesiology assistant, the anesthesiologist takes care of the anesthetic during surgery. After surgery, the anesthesiologist provides pain relief and critical care.

In preparation for your surgery, you will visit the preoperative screening (POS) clinic. During this visit:

- you will meet with the pharmaceutical assistant from the Pharmaceutical Support Center (part of the POS);
- you will complete the questionnaire on the computer;
- you will meet with the anesthesiologist;
- the anesthesiologist will perform a physical examination ;
- the anesthesiologist will determine the type of anesthesia with you;
- you will receive information on fasting guidelines;
- you will discuss the hospital admission.

Important!

You must fast before surgery. This is necessary to avoid food remnants from entering your airways should you vomit during or after surgery.

- If you are admitted before 1:00 pm: you may not eat anything after midnight before admission. You may have a glass of water or a cup of tea (with sugar) before 6:00 am. You may not drink more than 200 ml;
- If you are admitted after 1:00 pm: you may have a Zwieback or cracker with jam and a cup of tea (with sugar) on the morning of admission at 7:00 am. You may not drink more than 200 ml. You may drink a glass of water or a cup of tea (with sugar) up to 10:00 am. You may not have more than 200 ml.

Smoking

It is advisable not to smoke in the hours before your admission. Preferably at least 24 hours to clear the carbon monoxide from your blood. Carbon monoxide reduces the amount of oxygen.

Smokers' airways are often irritated and therefore more susceptible to inflammation. Furthermore, coughing can be very painful after surgery.

Medication

At the preoperative consultation, the anesthesiologist will tell you what medication you must take on the day of surgery and what medication you need to stop temporarily.

If you take blood thinners, it is very important that you inform the anesthesiologist about this.

Other advice

Before admission, you must remove jewelry such as watches, earrings and all other types of



piercings, rings and bracelets. You may not use any makeup, nail polish or face cream. Glasses and dentures must be left behind on the ward.

If you wear artificial nails, we ask you to leave at least one finger free of an artificial nail. During surgery, a clip will be attached to this finger to perform measurements.

Questions

If you have any questions about fasting before surgery, please feel free to contact the preoperative screening (POS) clinic at tel. (0183) 64 45 18, available Monday to Friday from 8:00 am to 5:00 pm.

Before treatment

You will have a combined appointment at the Pharmaceutical Support Center and preoperative screening (POS). During this appointment, the following will be done in sequence:

- meeting with the pharmaceutical assistant
- completing the questionnaire on the computer
- measuring blood pressure
- meeting with the anesthesiologist
- determining the method of anesthesia
- receiving information on fasting

This is explained in more detail below.

Meeting with the pharmaceutical assistant

At the POS clinic, you will start by meeting with a pharmaceutical assistant from the Pharmaceutical Support Center (part of the POS). You report to the hostess at A0.

- the pharmaceutical assistant will ask about your medications and allergies. This information is important for the follow-up talk with the anesthesiologist or anesthesiology assistant;
- it is advisable to bring a current medication list from your local pharmacy;
- even if you do not take medication or have allergies, the anesthesiologist will be informed about this. The pharmaceutical assistant will also ask about over-the-counter medicines (medicines that you can purchase at the drug store without a prescription).

After the visit to the Pharmaceutical Support Center, please report to the hostess at A0.

Completing the questionnaire

In preparation for surgery, you must complete a questionnaire on the computer in the waiting room. We recommend taking someone along if you have difficulty working on a computer. After that, the assistant from the PreOperative Screening clinic will measure your blood pressure, height and weight.

Meeting with the anesthesiologist

The anesthesiologist will ask questions about:

- your physical and mental condition
- medication you are taking



- surgery you have had in the past
- hypersensitivity reactions to medicines or latex (rubber)
- illnesses you have had

If you had nausea or had to vomit after previous surgery, it is advisable to discuss this. The anesthesiologist would also like to be informed about your dental condition and whether you have dentures, plates or loose teeth.

Physical examination by the anesthesiologist

The anesthesiologist will give you a physical examination; he will listen to your heart and lungs.

- if you are pregnant (or if the possibility exists), discuss this with the anesthesiologist.
- it is possible that additional testing will be arranged (ECG, blood tests).

In general, this physical examination can take place immediately after your visit to the clinic, the testing department or in the laboratory. If the results of a test give cause or if you need to undergo major surgery, it may be necessary to talk with a cardiologist, internist or lung specialist before surgery. An appointment with these specialist(s) will be made for you at the POS.

Determining the method of anesthesia

You will help in deciding which method of anesthesia will be used. The form of anesthesia applied will depend on the nature, severity and location of the surgery. The duration of the surgery will also play a role, as will your age and your mental and physical condition. Although you can help in deciding the type of anesthesia and there is a choice in many cases, it is not always possible for you to see the consequences of that choice. Therefore, the final decision lies with the anesthesiologist. In general, the choice is between:

- general anesthesia
- regional (local) anesthesia
- postoperative pain relief

In your meeting the anesthesiologist, you can ask anything about the anesthesia. If you have any questions about the surgery, you should consult your treating physician.

Information on fasting

To prevent a severe case of pneumonia, you need to 'fast'. Your stomach must be empty before surgery because of the risk of vomiting or choking. This means that you cannot eat or drink before surgery. You will receive advice about fasting at the POS. More information can be found in the fasting guidelines.

Admission

The day and time of admission are determined by the Admissions Office. Any *changes in your health* that occur between your visit to the POS and surgery should always be reported to the POS at tel.: (0183) 64 45 18.

Any *changes in your medication* that occur between your visit to the POS and surgery should always be reported to the Pharmaceutical Support Center at tel.: (0183) 64 46 34.

The length of your admission depends on the surgery, preparation for the surgery, and any additional illnesses. It is possible that:

you will have surgery on an outpatient basis;



- you will arrive at the hospital on the day of surgery; or
- you will be admitted for one or more days.

Your treating physician or the anesthesiologist will discuss this with you.

During treatment

Anesthesia is not the work of the anesthesiologist alone. He is assisted by a anesthesiology assistant. Together they give you the most accurate and safe anesthesia possible during surgery. Your body functions, such as breathing and circulation, will be constantly monitored. With the use of electronic equipment, the anesthesiologist and the anesthesiology assistant will check exactly how you are undergoing treatment.

It is possible that you will be given anesthesia by a different anesthesiologist than the one you spoke with at the preoperative screening clinic.

- Surgery is always a stressful event. Before you are brought to the operating room you can ask for a sedative or a sleeping pill in the form of a tablet, drink or injection.
- You must take off or remove your jewelry, piercings, glasses, makeup, contact lenses or dentures for general anesthesia.
- You must remove rings for both general and local anesthesia in connection with an infusion.
- You may wear hearing aids .

After treatment

After surgery you will be taken to the recovery room. Here, you will be connected again to monitoring devices. Sometimes you will be given extra oxygen through a tube in your nose. The anesthesiologist and specially trained nurses will monitor you until you are fully awake. Only then will you be returned to the ward.

It is possible that you may be drowsy for some time after surgery, have a sensitive throat or be nauseous. It is also possible that you will feel cold. You can ask the nurses in the recovery room to help you; they will do everything possible to prevent or remedy these inconveniences.

When you have returned to the ward and feel well, you can carefully start to drink something and later eat something.



Possible complications/risks

Every medical procedure, including anesthesia, entails a certain risk. As far as anesthesia is concerned, this risk is extremely small. New techniques, the availability of short-acting anesthetics, improved preparation for the surgical procedure and extensive and careful monitoring make anesthesia extremely safe. The anesthesiologist is intensively involved in your well-being before, during and after your surgery. Although serious complications from anesthesia almost never occur, the anesthesia may have the following more or less unpleasant side effects:

- You may have **pain** after the surgery. You can ask the nurse for pain relief. The nurses in the recovery room and on the ward have received instructions on what they may give you.
- A well-known aftereffect of anesthesia is **nausea and vomiting**. If you experience these, you can receive a suppository or an injection from the nurse.
- If you have not urinated several hours after surgery and you have (vague) pain symptoms in the lower abdomen, this may indicate a bladder that is too full. This can occur both after general and local anesthesia. You should alert the nurse. If necessary, you will receive a bladder catheter.
- If you awaken with a **heavy or scratchy sensation in the back of your throat**, that comes from the measures that were taken to support your breathing. That sensation usually disappears within a day.
- After surgery you may suffer from muscle pain. This pain is of a transitory nature. The pain may be caused by lying in one position on the operating table or by your posture during surgery. Your body will recover at its own pace.
- With general anesthesia it is often necessary to insert a breathing tube to monitor your breathing better. Although this breathing tube is inserted and removed carefully, there is always a risk of **damage to the teeth or crowns**.
- After an epidural, there is a slight chance that you will get a headache, sometimes after a few days. This headache can be distinguished from an 'ordinary' headache because the pain worsens when you sit up and improves when you lie down. In general, this headache only lasts for a few days. Contact the hospital and ask for the anesthesiologist (on duty) to discuss your headache symptoms.
- You may tire easily after surgery and suffer from concentration problems and memory disorders. These symptoms are not only caused by the anesthesia but are also a result of the surgery. Your body has a lot to process. It is logical that you are not fit immediately after surgery. These symptoms decline as your recovery progresses and you regain your strength.
- Sometimes a **backache** occurs at the site of the epidural. These symptoms gradually disappear. If you wish, you can contact the anesthesiologist about this.

Rules after treatment

If you can go home on the day of surgery:

- You may not drive a car after surgery; make sure that you have someone to take you or arrange transportation by taxi.
- During the first 24 hours after surgery, it is very important that someone is present or available in your immediate vicinity.
- Do not operate machinery and/or make any important decisions.



Contact

Surgery is a stressful event. The surgeon can explain it all to you.

You will discuss the anesthesia that is needed for surgery during the preoperative consultation with the anesthesiologist or nurse anesthetist. If you would like to know more about the anesthesia, ask your questions during the talk with the anesthesiologist or nurse anesthetist. He or she is willing to answer all your questions as clearly and as thoroughly as possible.

Finally

If you still have questions or complaints about your health or otherwise after surgery that are related to the anesthesia, the anesthesiologist who has given you the anesthesia can be contacted via the POS at tel. (0183) 64 45 18.

For questions, changes in your health condition or to make an appointment, you can call the POS. The POS is available on workdays from 8:00 am to 5:00 pm at tel. (0183) 64 45 18.

For questions about medication or changes in your medication, you can call the Pharmaceutical Support Center. The Pharmaceutical Support Center is available on workdays from 8:00 am to 4:30 pm at tel. (0183) 64 46 34.

You will be called about the definitive surgery date by the Admissions Office. For questions about your admission, you can call the Admissions Office. The Admissions Office is available on workdays from 8:30 am to 4:30 pm at tel. (0183) 64 44 49.

More information

- You can also read more information about anesthesia on the websites of: The Dutch Association for Anesthesiology: <u>www.anesthesiologie.nl/p_voorlichting</u>
- Medical homepage: <u>www.medischestartpagina.nl/Anesthesiologie</u>

