Kantonsspital Graubünden



Department ANIR (Anesthesia, Emergency Medicine and Intensive Care)
Institute for Anesthesiology and Pain Medicine KSGR
Chief Anesthetist Dr. T. J. Sieber, MBA

Team



Anesthesia Information and Consent

Dear Patient/Parent

You/your child is/are to undergo a surgical procedure with anesthesia. The anesthesia doctor will inform you personally about the different forms of anesthesia, their advantages and disadvantages and will choose with you the best option for the given procedure. Please read this information carefully and fill in the accompanying questionnaire.

Safety and side effects of Anesthesia

The safety of anesthesia today is outstanding and the risk of life-threatening complications is minimal even with very sick patients. All vital parameters are continuously recorded throughout the procedure, deviations are treated immediately, if warranted. Additional risk is possible in cases where invasive procedures are necessary, such as the placement of arterial or central venous lines or use of blood products.

> Specific risks of general anesthesia

Dental damage (especially with pre-existing deficiencies), aspiration of gastric content, and damage to vocal cords. Unpleasant side effects that are usually self-limiting: hoarseness, difficulty with swallowing, postoperative nausea and vomiting, shivering, and difficulties to urinate.

Specific risks of regional anesthesia

Nerve damage (sensory and motorial, mostly transient and rarely permanent), headache, lowering of blood pressure with nausea. If a regional anesthesia is insufficient than it is always possible to complement this with a general anesthetic.

Specific risks of Monitored anesthesia care ("MAC")

The application of sedative and analyseic medications can lead to respiratory depression and drowsiness.



Forms of Anesthesia

General Anesthesia

General anesthesia is a medically induced coma with loss of protective reflexes, resulting from the administration of one or more general anesthetic agents. It is carried out to allow medical procedures that would otherwise be intolerably painful for the patient; or where the nature of the procedure itself precludes the patient being awake.

> Regional Anesthesia

Regional anesthesia makes a specific part of the body numb to relieve pain or allow surgical procedures to take place. Types of regional anesthesia include spinal anesthesia (also called subarachnoid block), epidural anesthesia and nerve blocks. Regional anesthesia is often used for orthopedic surgery on extremities (arm, leg, hand, or foot), for female (gynecological procedures and cesarean section) or male reproductive surgery, and for operations on the bladder and urinary tract. Epidural analgesia (pain relief) is commonly used to ease the pain of labor and childbirth but can also be used to provide anesthesia for other types of surgeries.

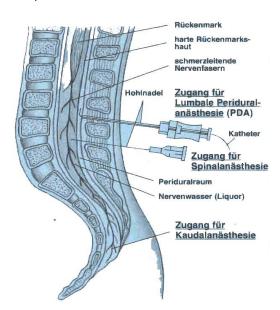


Illustration 1: Spinal, Epidural and Caudal Anesthesia

During regional anesthesia it is possible to listen to music. If regional anesthesia is insufficient, then a conversion to general anesthesia is always possible.

Combined Anesthesia (Regional and General Anesthesia)

For more extensive surgeries (both adults and children) it is possible to combine regional and general anesthesia. The main advantage of this combination is that a lesser degree of general anesthesia is required and that regional anesthesia can be used for postoperative pain control.

Monitored anesthesia care ("MAC")

Some procedures (e.g. pacemaker implantations, cataracts) can be done under local anesthesia alone but need the surveillance and possible intervention of an anesthesia team. In these circumstances the anesthesia team closely monitors the patient and applies sedatives or other medications as needed.



Postoperative pain therapy

For the treatment of postoperative pain there is a wide array of analgesic options that will be tailored to your needs.

Your contribution to your own safety

You should not eat or drink before surgery and anesthesia according to our specific guidelines. Please follow our recommendations carefully. If possible please refrain from smoking the day before and the day of surgery. Please take all medications on the day of surgery only as advised by your anesthesiologist. Do not take your contact lenses, dentures, jewelry and glasses to the operating room.

If your surgery and anesthesia do not involve an overnight stay please be advised that you are not allowed to drive yourself for the following 24 hours. Do not make any significant and legally binding decisions within 24 hours after your procedure.



General remarks

The purpose of this document is to help you prepare for the discussion with your anesthesiologist. Please feel free to talk about any topic that is raised in this document and ask all questions that may arise. We are happy to discuss all aspects of your anesthesia care and perioperative stay. You can contact us as well afterwards (see contact information below).

Additional comments/notes indications for your anesthet	of your anesthesiologist (indiv ic, perioperative and postoperative	idual risk-enhancing circum procedures, specific blood-sa	nstances, specific
Planned anesthesia procedu	re		
Specific postoperative pain t	herapy		
□ Conventional□ Patier□ Peripheral Pain Catheter/	t controlled pain pump (PCA) Other	☐ Epidural anesthesia (PD/	4)
planned anesthesia proced complications, risks, risk-infl	that I have been informed speci ure (including advantages and sh uencing factors) and that I agree w s and adaptations to the procedure	ortcomings of the different r ith the suggested procedures	nethods, possible
Plac	ce, Date		
Tim	e of Consultation		
Sigr	nature Patient/Parent		
	sthesia cialist/Anesthesiologist		

For questions do not hesitate to contact us at any time:

➤ Anesthesia consultation office: Tel. 081 256 76 30 (Secretary) 09:00 – 16:30 or 081 256 65 08 (on-call anesthesiologist