Information leaflet for General Anesthesia

Dear patient, dear parents!

The planned procedure is to be performed under **general anesthesia**, i.e. while pain sensation is eliminated. The anesthesiologist will select the appropriate type of anesthesia and talk to you about its advantages and disadvantages compared to other possible anesthetic procedures. Please answer the questions at the back of this sheet before the preoperative discussion, in order to help the doctor to adjust the anesthesia to your personal health condition. Also you should see your general practitioner to get done all the preexamination necessary before the surgery. This usually includes a blood test and an ECG analysis if the patient is about 40 years or older. Under certain circumstances they may also be necessary for younger patients.

**General Anesthesia** renders the patient unconscious and causes the loss of pain sensation. This condition can be compared to a sleep like state. A general anesthetic is mostly injected into a vein. In more lengthy operations, the injection is repeated, the anesthetic is administered continuously or the patient receives inhalation anesthetics.

During the general anesthesia the natural breathing is suppressed, so that air supply to the lungs has to be facilitated by **artificial ventilation**. This can happen by utilisation of a face mask (only during very short procedures), via a breathing tube with a balloon at its tip which is inserted until it reaches the larynx where the balloon is then inflated (**laryngeal mask** or **.LAMA**), or via a tube which is inserted into the windpipe (**endotracheal tube** or **.ET tube**) after the patient is asleep. The ET tube reduces furthermore the risk that saliva or stomach contents will enter the lungs (**aspiration**).

Despite the greatest care taken, injuries to the throat, voice box, vocal cord, windpipe or damages of teeth could occur. Please note that these complications are very rare. Also of very rare occurrence is a damage of skin, tissue as well as nerves caused by pressure or overstretching during the anesthesia.

Nausea and vomiting have become rarer. If there has been any bad experience in previous anesthesia please let us know before the procedure.

Severe complications caused by saliva or stomach contents entering the lungs (**aspiration**), are very rare with patients who have obeyed the preoperative fasting. Please note that it is very important for your own safety that you don't eat, drink or smoke in the last six hours before the anesthesia. The only exception is tea or water which can be drunk up to two hours before the procedure.

Life-threatening complications such as severe allergic reactions, circulatory collapse, cessation of breathing or blockage of a blood vessel (**embolism**) caused by a blood clot (**thrombus**) are extremely rare even in patients of advanced age, in poor general health or suffering from accompanying disease.

**After the anesthesia** you will recover in a wake-up-room until you can be discharged. You must be picked up and taken home by an accompanying adult and home care must be insured. Due to the after-effects of the anesthesia you must not drive/actively take part in traffic or operate machinery. You must not use tranquilizers or sedatives, and you must not drink alcohol or make any important decisions for 24 hours, unless instructed otherwise by the doctor. Please make sure that you can be reached by telephone during that timeframe.
1. Do you take any medications? 
   O yes  O no

2. Did you have previous operations? 
   O yes  O no

3. Did you experience any problems after a previous anaesthesia? 
   O yes  O no

4. Had there been any problems in the family during or after an anaesthesia? 
   O yes  O no

5. Do you have cardial problems or shortness of breath when climbing stairs? 
   O yes  O no

6. Did you have a heart attack? 
   O yes  O no

7. Did you have a stroke? 
   O yes  O no

8. High or low blood pressure? 
   O yes  O no

9. Chronic bronchitis, asthma? 
   O yes  O no

10. Do you have allergies? 
    O yes  O no

11. Do you have diabetes? 
    O yes  O no

12. Muscle weakness or other muscle diseases – also in blood relations? 
    O yes  O no

13. Do you have loose teeth? 
    O

14. Do you smoke – how much? 
    O

15. Do you drink alcohol – how much? 
    O

16. Female patients: 
    O could you possibly be pregnant? 
    O yes  O no

17. Other diseases? – Which ones? 
    O yes  O no

18. Who will provide constant care during the first 24 hours? – Telephone number?

Notes on the preoperative discussion by the Doctor: (from ___ to ___ m)

I read and understood the information at the backside. I also understood the information of the preoperative discussion. There was the possibility to ask all necessary questions. I made my decision after thorough consideration. I do not need more time to think it over. I consent that the planned procedure is performed under general anaesthesia.

Procedure: ______________________________

Doctor: ______________________________
Date  Signature

Patient: ______________________________
Date  Signature
O copy received
O no copy necessary

Patient: ______________________________
Date  Signature