

Information for patients who need to be operated under anaesthesia or who need other therapeutic or diagnostic procedures under anaesthesia

Dear Sir/Madam,

It is our wish and obligation to explain to you the course of pre-surgical (anaesthetic) preparation, the very anaesthetic (intra-surgical) and the post-surgical procedure.

Today, anaesthesia is considered a very safe procedure for surgeries. It allows patients to undergo invasive medical procedures (surgeries or diagnostic/therapeutic interventions) with minimal pain, suffering or discomfort. It is administered by an anaesthesiologist or a technician of anaesthesiology.

Surgeries are performed under general, regional or local anaesthesia. The anaesthesiologist chooses the type of anaesthesia together with you after a preanaesthetic evaluation.

Every surgery carries a risk. The risk for the occurrence of undesired events or complications during an anaesthetic procedure depends primarily on the type and severity of the basic disease, possible accompanying illnesses, the patient's age, current health condition and habits. It is very important that you read carefully the questionnaire you will receive and sign it as a confirmation.

General anaesthesia induces a state similar to deep sleep. During an operation, the anaesthetics are administered through a vein (intravenous anaesthesia) or the patient inhales them through a mask or tube placed in trachea. The anaesthesiologist monitors life functions and takes care of the patient during the surgery. General anaesthesia is used in major surgeries of the thorax, abdomen, head, ORL surgical procedures etc.

Complications:

Frequent (less serious and transitory; in 1 patient out of 100 cases of administered anaesthesia):

- *Nausea and vomiting, sore throat, hematoma, pain and redness where anaesthetics were introduced in the vein, pain during the injection of anaesthetics, headache, shivering while waking up, minor injuries of lips and the tongue, dizziness and unclear vision, puzzlement and loss of memory, problems with urination.*

Rare (serious, sometimes life-threatening; in case of less than 1 patient out of 1000 cases of administered anaesthesia):

- *Respiratory infections, difficulties with breathing due to the prolonged anaesthetics' activity, damage to teeth, injury to the vocal cords, injuries to the limb nerves with transitory or permanent paralysis or loss of sensation, being wake during the surgical procedure, decrease and increase in heart pressure, heart function disruption, deterioration of the already existing disease, aspiration of stomach content, heart attack or stroke, injuries to the eyes, life-threatening allergic reaction, complications in the transfusion of blood, malign hyperthermia – 1 out of 50 000 anaesthesias (life-threatening gene-induced disorder caused by anaesthetics), instruments' malfunction, even death (3-5 out of 1,000,000 patients).*

Regional anaesthesia leaves a part of the body without sensation. The patient gets usually mildly sedated. This type of anaesthesia is used in orthopaedic surgical procedures, in labour, in older patients. Generally, it is "less aggressive" than general anaesthesia.

Complications:

Frequent (less serious, transitory):

- *Pain on the spot where it has been administered, inefficiency or less effectiveness (5%); itching, nausea, difficulties while urinating (up to 16%), decrease in heart pressure, headache after spinal anaesthesia (10%), puzzlement.*

Rare and less frequent (serious, sometimes life-threatening):

- *Difficulties in breathing, systemic toxicity (heart function disruption, loss of consciousness, 10-20 out of 10 000 patients), nerve damage (temporary or permanent paralysis and/or loss of sensations; 1:10 000 – 1:30 000), hematoma and infection after spinal or epidural anaesthesia with possible paralysis and a necessary surgical procedure (1:150 000), life-threatening allergic reactions, even death (30% less than in general anaesthesia)*

Local anaesthesia is performed by the surgeon in minor surgical procedures (inpatient)

Possible complications (you will be warned about them by the operator)

- *Weaker efficiency, overdose with local anaesthetic (decrease in the pressure, difficulties in breathing, vertigo), systemic toxicity (heart function disruption, loss of consciousness), life-threatening allergic reactions, even death.*

There are other possible rare complications that you can discuss with your anaesthesiologist.

Preparation for the surgical procedure

Pre-surgical anaesthetic evaluation

- Upon surgeon's examination and his/her decision to do a surgical treatment, you will receive the instructions and forms to fill in and bring (with the referral) to the anaesthetic pre-surgical examination. Then you should bring also the following:
- **The required laboratory and test results**
- **Anaesthesiology questionnaire on page 3 filled and signed**
- **The medication that you use** (including the inhalers and eye drops), medication you bought without prescription, vitamins and herbal preparations.
- The anaesthesiologist will evaluate your capability to undergo an operation after the examination and will determine additional possible examinations and tests
- You will sign **the informed consent, or refuse to provide the informed consent** on page 4 of these instructions after having talked to the anaesthesiologist

Preparation for anaesthesia 24 hours prior to the surgical procedure

- The night before the surgery you should take a shower (and shave), remove the nail polish, make up, jewellery, the watch, etc.
- You will be visited once again by the anaesthesiologist
- You should sign the consent to anaesthesia and the surgical procedure if you accept it
- You should take medication on the advice of the anaesthesiologist

The night before the surgery

- Follow the special instructions you received regarding eating and drinking (you should not eat or drink from midnight to morning – 6 hours)
- Take the medication you need to take the night before the surgery with some (a sip of) water

The morning when the surgery is scheduled

- You should remove your denture, contact lenses, etc.
- Half an hour to 1 hour prior to the surgery you will receive a pill or an injection (a sedative) that will prepare you for the surgical procedure/anaesthesia

Preparation for a minor (inpatient) surgical procedure or examination

Some procedures can be performed as inpatient treatment (minor surgical and gynaecologic procedure, endoscopic examinations, radiological examination, etc.). We perform them in the so called short "intravenous anaesthesia". In this case you will meet an anaesthesiologist shortly before the procedure. For this procedure you have to do the following:

- **Not eat or drink 6 hours before the surgery** (you will receive the information when you book the appointment for the examination)
- **Fill in the anaesthesiology questionnaire and sign the consent to anaesthesia and the surgical procedure if you accept it**

You will be monitored 1-2 hours after the surgery. You will be able to eat and drink 2 hours after the procedure (if not stated otherwise). You should not drive a vehicle 24 hours after receiving anaesthesia.

Please, fill carefully this pre-surgical questionnaire. If some of the points from the questionnaire are not clear, please consult an anaesthesiologist before answering. If the answer is YES, please tick the box.

Surname, name, year of birth _____ Department _____

Age		Allergy – to medication	<input type="checkbox"/>
		- To rubber	
		- Other (food, etc.)	
Height (cm)		Do you wear glasses or contact lenses?	<input type="checkbox"/>
Weight (kg)		Denture, loose teeth	<input type="checkbox"/>
Gender	F <input type="checkbox"/> M <input type="checkbox"/>	Do you wear hearing aid?	<input type="checkbox"/>
Heart diseases (heart attack, heart murmur, irregular heart function)	<input type="checkbox"/>	Voice changes recently	<input type="checkbox"/>
Chest pain	<input type="checkbox"/>	Permanent jewellery, piercing on the body and in the mouth	<input type="checkbox"/>
Heart surgeries, placement of cardiac electro-stimulator, stent placement	<input type="checkbox"/>	Last menstruation, when	<input type="checkbox"/>
Increased heart pressure	<input type="checkbox"/>	For women: Are you maybe pregnant?	<input type="checkbox"/>
Artery diseases	<input type="checkbox"/>	Can you go to the second floor on foot?	<input type="checkbox"/>
Vein diseases, varicose veins, vein thrombosis	<input type="checkbox"/>	Can you do physically lighter jobs (dust removal, etc.)?	<input type="checkbox"/>
Blood cell diseases	<input type="checkbox"/>	Other diseases	<input type="checkbox"/>
Abnormal blood clotting, prolonged bleeding, bruises, anaemia	<input type="checkbox"/>	Which ones:	<input type="checkbox"/>
Lung and airway diseases (asthma, emphysema, sleep apnoea)	<input type="checkbox"/>	Do you refuse a possible blood transfusion?	<input type="checkbox"/>
Frequent quotidian coughing	<input type="checkbox"/>	Medication you take:	<input type="checkbox"/>
Lack of air when laying without a pillow	<input type="checkbox"/>	Which ones:	
Do you take medication to breathe easily?	<input type="checkbox"/>	Previous cases of anaesthesia (surgeries)	
Have you had a cold, pneumonia or bronchitis recently?	<input type="checkbox"/>		
Liver diseases, jaundice, hepatitis	<input type="checkbox"/>	Were there any complications in anaesthesia?	<input type="checkbox"/>
Kidney, urinary tract and prostate diseases	<input type="checkbox"/>	Which ones:	
Digestive system diseases, gastritis, ulcer disease, reflux, hiatal hernia	<input type="checkbox"/>	Complications in anaesthesia in blood relatives	<input type="checkbox"/>
Thyroid gland diseases	<input type="checkbox"/>	Which ones:	
Diseases of the eyes, increased intraocular pressure	<input type="checkbox"/>	Smoking, how much:	<input type="checkbox"/>
Diabetes	<input type="checkbox"/>	Alcohol, how much:	<input type="checkbox"/>
Brain and nervous system diseases (stroke, epilepsy, etc.)	<input type="checkbox"/>	Opioid substances:	<input type="checkbox"/>
Mental diseases	<input type="checkbox"/>	Patient's questions	<input type="checkbox"/>
Depression, anxiety, psychiatric disorders	<input type="checkbox"/>		
Diseases of the bones and joints, spine	<input type="checkbox"/>		
Surgery of the spine, implants	<input type="checkbox"/>		
Limited neck mobility, pain	<input type="checkbox"/>		
Face and jaw surgeries	<input type="checkbox"/>		
Muscle diseases	<input type="checkbox"/>		
Infectious diseases, e.g. HIV/AIDS, hepatitis B and C	<input type="checkbox"/>	Patient's or guardian's signature	

The informed consent

For accepting the suggested diagnostic, i.e. therapeutic procedure

I do hereby state that with my free will, having been completely informed about the suggested diagnostic and therapeutic procedures that I received in written and oral form, I accept:

All the anaesthesiology procedures

Patient's name and surname: _____ Gender: M F

Date of birth: _____ Place of birth: _____

Address: _____

The insured person's identification number in mandatory health insurance: _____

Name and surname of the legal guardian: _____

(For unconscious patients, and those with mental disorders, as well as for persons occupationally disabled and minor aged persons)

Doctor's signature and stamp: _____

Place and date: _____

Patient's or legal guardian's signature

Statement of refusal

To accept the recommended diagnostic, i.e. therapeutic procedure

I do hereby state that with my free will, having been completely informed about the suggested diagnostic and therapeutic procedures that I received in written and oral form, I refuse:

All the anaesthesiology procedures

(State the recommended diagnostic i.e. therapeutic procedure)

Patient's name and surname: _____ Gender: M F

Date of birth: _____ Place of birth: _____

Address: _____

The insured person's identification number in mandatory health insurance: _____

Name and surname of the legal guardian: _____

(For unconscious patients, and those with mental disorders, as well as for persons occupationally disabled and minor aged persons)

Doctor's signature and stamp: _____

Place and date: _____

Patient's or legal guardian's signature

Information for the patients who will undergo an intervention-therapeutic procedure at the Clinic for the treatment of pain – the informed consent

Dear Sir/Madam,

It is our wish and obligation to explain to you the suggested therapeutic-intervention procedure, its advantages and possible complications. **Every medical procedure carries a certain risk.** It is very important that you read carefully the questionnaire you will receive and sign it as a confirmation. Also, if you do not agree with the suggested procedure, please sign the statement of refusal of the procedure. **The consent and refusal forms are at the back of the sheet.**

Besides the most frequently used methods of treating pain – medication and non-aggressive methods – there are intervention procedures that can be suggested as a way of treatment. Some of them are:

- **Epidural analgesia and steroids:** with previous local anaesthesia of the skin, a needle and catheter are placed into the lower part of the spine. We use them in certain painful syndromes of the spine and when treating patients suffering from cancer.
Advantages: therapy efficiency, avoidance of strong analgesics' side effects (opioid substances), nausea, dizziness, constipations, etc.
Complications:
 - *Frequent (less serious, transitory): Pain on the spot where it has been administered, inefficiency or less effectiveness (5%); itching, nausea, difficulties while urinating (up to 16%), decrease in heart pressure, headache, increase in the blood glucose after the administration of corticosteroids (especially in patients suffering from diabetes)*
 - *Rare and less frequent (serious, sometimes life-threatening: difficulties while breathing, systemic toxicity (heart function disruption, loss of consciousness, 10-20 out of 10 000 patients), nerve damage (temporary or permanent paralysis and/or loss of sensations; 1:10 000 – 1:30 000), hematoma and infection after spinal or epidural anaesthesia with possible paralysis and a necessary surgical procedure (1:150 000), life-threatening allergic reactions, even death.*
- **Peripheral nerve and joint blocks:** with previous local anaesthesia of the skin, a needle is placed near the nerve or in the joint crack, or locally where pain is felt.
Advantages: therapy efficiency, avoidance of strong analgesics' side effects (opioid substances), nausea, dizziness, constipations, etc.
Complications:
 - *Frequent (less serious, transitory): Pain on the spot where it has been administered, inefficiency or less effectiveness (5%); itching, decrease in heart pressure, headache, increase in the blood glucose after the administration of corticosteroids (especially in patients suffering from diabetes)*
 - *Rare and less frequent (serious, sometimes life-threatening: difficulties while breathing, systemic toxicity (heart function disruption, loss of consciousness, 10-20 out of 10 000 patients), nerve damage (temporary or permanent paralysis and/or loss of sensations; 1:10 000 – 1:30 000), life-threatening allergic reactions, even death.*

There are other possible rare complications that you can discuss with your anaesthesiologist.