

ANESTHESIA

PATIENT EDUCATION

This information applies to a number of surgeries or procedures a patient may have. The word "surgery" is used throughout as a general term that covers both surgeries and procedures.

WHAT TO EXPECT BEFORE SURGERY

Prior to your surgical procedure, you will undergo a preoperative evaluation. This evaluation focuses on your health and choosing an anesthetic plan that is right for you and your surgery. The anesthetic plan will be discussed with you before your surgery.

This can include:

- A review of your medical history, including medications you are taking and any allergies you may have
- A physical examination
- Blood and lab tests
- EKGs or X-rays

In order to manage surgical pain effectively, you may be given a nerve block before your surgery at the request of your surgeon. This is known as a preoperative nerve block. A preoperative nerve block may be performed by an anesthesiologist who may be different than the anesthesia team member who will care for you during your surgery.

WHAT TO EXPECT DURING SURGERY

During surgery, you will be provided with comprehensive anesthesia care, based on both the anesthetic plan and the type of surgery you are having. It is the responsibility of the anesthesiologist and his team to manage your pain and comfort throughout the surgery.

This can include:

- Administration and regulation of the anesthetic to ensure your pain is completely controlled during your surgery
- Management of your body functions during the surgery, such as heart rate and blood pressure. Depending upon the type of procedure you are having, you may:
 - ❖ be in an unconscious state during the procedure
 - ❖ have a sedative administered
 - ❖ or remain awake.

WHAT TO EXPECT AFTER SURGERY

After your surgery you will be taken to recovery for monitoring. The recovery nurse will check your activity level, breathing, circulation and level of consciousness. The anesthesiologist is available to help control any postoperative pain and/or nausea.

Due to the nature of some of the medications used, you may have little to no memory of the operative and post-operative period. Many patients will only remember waking up while getting dressed, being taken to the car or even the drive home! Please know that this is normal, we take your safety very seriously at The Buffalo Surgery Center and only allow you to leave the facility when it is safe for you to do so.

GENERAL ANESTHESIA

There are two main types of general anesthesia. Intravenous anesthesia is given through an IV line. Inhaled gas anesthesia is given through a mask or a breathing tube. The type used depends on the surgery. The anesthesiologist puts you into a state of deep sleep (temporarily unconscious) to keep you from feeling pain during surgery. Because you are under general anesthesia, you feel no pain and remember nothing of the surgery. During the procedure, the anesthesiologist or a member of his team is continuously present and monitors your vital signs to make sure they are normal and steady.

RISKS AND COMPLICATIONS OF GENERAL ANESTHESIA

The risks and complications of anesthesia depend on your overall health.

The most common side effects of general anesthesia include:

- Sore throat
- Nausea
- Vomiting
- Hoarseness
- Dizziness
- There is a small risk that damage to your teeth can occur when placing the breathing tube, so it is important to let the anesthesiologist know if you have any loose teeth or dentures.

Rare but severe risks or complications of general anesthesia include the following:

- Allergic reaction
- Infection
- Irregular heartbeat
- Loss of limb or life
- Awareness and pain during procedure
- Injury to arteries, veins nerves, voice, skin or vital organs
- Aspiration
- Breathing problems
- Cardiac arrest

Effects of general anesthesia may last up to 24 to 48 hours after surgery and you should therefore refrain from major decision making, signing important documents and performing activities that require skill, such as driving a vehicle and athletic events.

MONITORED ANESTHESIA CARE (MAC)

MAC is also known as mild or moderate sedation. An anesthesiologist or a member of the anesthesia team gives you medications (sedatives) to relax you through an intravenous (IV) line. A local anesthetic may also be injected into the skin and tissue around the surgical site to decrease sensation and to keep you from feeling pain during surgery. You may feel drowsy during surgery with MAC. The effects of MAC, when combined with regional anesthesia, may last eight to 24 hours or more after the procedure, depending on the type and amount of anesthesia used. A significant benefit of MAC over general anesthesia is that it does not require insertion of a breathing tube and the risks associated with breathing tubes.

RISKS AND POSSIBLE COMPLICATIONS OF MAC

MAC has some risks, these include the following:

- Breathing problems
- Headache
- Nausea
- Vomiting
- Allergic reaction (rare)

REGIONAL ANESTHESIA

The anesthesiologist blocks sensation in a specific area of your body by injecting anesthetic medication near the major nerves surrounding the area of surgery to keep you comfortable and control your pain. This type of anesthesia is often used for surgery on the arms and legs.

Peripheral nerve blocks do not put you to sleep but are commonly used along with MAC or with general anesthesia. The decreased sensation effect may last for several hours after a surgical procedure, depending on the type and amount of anesthesia used. Your anesthesiologist may use one of the following methods of regional anesthesia:

- Nerve block – Local anesthesia is injected near the major nerves surrounding the area of surgery

[For information on peripheral nerve blocks, see **handout**.](#)

PERIPHERAL NERVE BLOCK

A peripheral nerve block may be requested by your surgeon for improved pain control after surgery. It is a type of regional anesthesia that involves an injection of numbing medicine (local anesthetic) around the nerves to reduce transmission of pain signals to the brain to keep you comfortable and control your pain.

A peripheral nerve block does not put you to sleep. However, you will likely receive IV sedation to relax you prior to the start of your nerve block. The type of peripheral nerve block you will receive depends on the type of surgery. Peripheral nerve blocks are performed by a board-certified anesthesiologist under ultrasound guidance.

The site of the injection depends on the part of the body being treated. A peripheral nerve block can partially or completely block sensation in an arm, leg or other area for surgery but does not put you to sleep. It can be combined with sedation or general anesthesia during surgery.

After surgery, your treated limb may have decreased sensation; it may feel heavy or weak. You may have trouble controlling your limb and may need to use a sling or crutches while the anesthetic wears off. Depending on the type, location and medications used, the effects of the nerve block can last from eight to 20 hours or more after surgery.

BENEFITS of a PERIPHERAL NERVE BLOCK

- Reduced need for narcotic (opioid) pain medication after surgery
- Improved pain control after surgery

Peripheral Nerve Blocks Performed at The Buffalo Surgery Center

SHOULDER, ARM, ELBOW AND WRIST SURGERY

A local anesthetic is injected either at the base of the neck above the clavicle or in the axilla (armpit) on the side of surgery termed a brachial plexus nerve block. It decreases sensation of the shoulder, elbow and wrist or hand. It can help control your pain after surgery and usually lasts 10 to 24 hours. Your arm will have decreased sensation during that time, making it difficult to move. Your arm will be placed in a sling for support. Arm function will return to normal after the block wears off.

It may seem strange that the whole arm needs to be numbed for an operation on your wrist or hand. However, at the beginning of your operation a very tight band, called a tourniquet, is put around the top of your arm. This would be uncomfortable for you if the top of the arm was not numb.

KNEE SURGERY

An adductor canal nerve block is performed by administering an injection to the mid-thigh of the surgical side. Often, a second injection is administered behind the knee to help control pain. You should be able to perform physical therapy later that day as these blocks typically do not cause weakness.

FOOT AND ANKLE SURGERY

A popliteal block is performed by administering an injection to the lower thigh, an area called the popliteal fossa. This is where the nerve which supplies your lower leg and foot is found. You should not bear any weight for 24 hours, after the nerve block wears off, please follow your surgeon's instructions for weight bearing.

