



Anesthesia Patient Education

Anesthesia is used in a variety of ways for a number of surgeries and procedures performed at Community Memorial. Understanding the type of anesthesia you will receive helps ensure a successful procedure and a smooth recovery. Please review the information below and discuss any questions or concerns with your surgeon or anesthesiologist prior to your surgery or procedure.

Physician Anesthesiologists

A member of Community Memorial's Physician Anesthesiology team will help supervise your care before, during, and after surgery. They will deliver your anesthesia, ensure your safety and comfort during your surgery, and be available for post-procedure pain management as needed. Our anesthesiologists are experienced, board-certified, and many have additional sub-specialty training in pediatric anesthesia, pain management, and cardiothoracic surgery.

What to Expect Before Surgery

Prior to your surgery, you will undergo a preoperative evaluation to help your surgeon and anesthesiologist understand your overall health and choose an anesthetic plan that is right for you and your surgery. This evaluation 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 and/or X-rays

In order to effectively manage your pain, your surgeon may request a nerve block before your surgery. This is known as a preoperative nerve block and may be administered by an anesthesiologist who is different from the one you will have during surgery.



What to Expect During Surgery

During surgery, you will be provided with comprehensive anesthesia care based on your anesthetic plan and the type of surgery you are having. You may be in an unconscious state, sedated, or awake and alert. During this time, your anesthesiologist is responsible for managing your pain and ensuring your comfort. This may include:

- Administration and regulation of anesthetic to ensure your pain is completely controlled during your surgery
- Management of your vital body functions such as heart rate and blood pressure

What to Expect After Surgery

After your surgery, you will recover in our Post-Anesthesia Care Unit (PACU) or Same Day Surgery recovery area. Your recovery nurse will monitor your activity level, breathing, circulation, and level of consciousness. They will be available, along with your anesthesiologist, to help control postoperative pain and nausea as needed.

Types of Anesthesia

Depending on the type and duration of your surgery and your anesthetic plan, you will receive one or more of the anesthesia types listed below. You should be sure to discuss any questions or concerns you have with your surgeon or anesthesiologist prior to your surgery.

General Anesthesia

General anesthesia puts you in a state of painless amnesia and unresponsiveness. If you receive general anesthesia, you will feel no pain and remember nothing about your surgery. Your anesthesiologist is continually present, keeps you comfortable, and monitors your breathing and blood pressure.

General anesthesia is used for many procedures that take varying amounts of time. It is either delivered through an IV line (intravenous anesthesia) or through a mask or breathing tube (gas anesthesia).

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
- Hoarseness
- Nausea
- Dizziness
- Vomiting

Rare but severe risks or complications of general anesthesia include:

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

Effects of general anesthesia may last up to 24–48 hours after surgery. You should refrain from making major decisions, signing important documents, driving, and performing other high-skill activities during this time.

IV/Monitored Sedation

Sometimes referred to as "twilight sleep," this type of anesthesia is most commonly used for minimally invasive procedures where an injection of local anesthetic is not sufficient, but deeper general anesthesia is not necessary.

Your anesthesiologist will deliver sedatives to relax you through an intravenous (IV) line. Depending on your surgery, a local anesthetic may also be injected at the surgery site to keep you from feeling pain.

The effects of IV/monitored sedation last 8-24 hours, depending on the type and amount of anesthesia used. A significant benefit of this type of anesthesia is that its effects are usually shorter in duration and a breathing tube is not required.

Risks and Possible Complications of IV/Monitored Sedation

Monitored sedation has some risks, including:

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

Regional Anesthesia

With regional anesthesia, anesthetic medication is injected close to a nerve or the spinal cord to numb a specific part of the body. This type of anesthesia can allow you to remain awake and aware during your surgery or procedure. It is often used during childbirth, and also helps alleviate pain for up to 24 hours following an orthopedic procedures. Your anesthesiologist may use one of the following methods of regional anesthesia:

- Nerve block local anesthesia injected near the major nerves surrounding the surgical area
- Spinal local anesthesia injected directly into the fluid surrounding the spinal cord in the back
- Epidural local anesthesia injected in the epidural space

Spinal and epidural anesthesia provide pain relief from the chest down to the legs. Risks of spinal and epidural anesthesia include:

- Difficulty urinating
- Headache
- Drop in heart rate or blood pressure
- Short or long-term weakness from nerve damage (rare)

Local Anesthesia

Local anesthesia is used for minor procedures that only require the injection of a Novocain-like medication to numb a small area. Stitches or other skin procedures such as Mohs surgery or mole removals are common instances where local anesthesia is appropriate.

Preparing for Anesthesia: The Path to a Safe Surgery Begins with You

Medications & Supplements

Medications and supplements can impact anesthesia and pain management. Please have a list of your medications and supplements available for your pre-op phone interview and on the day of your surgery or procedure.

Smoking

Smoking damages your heart and lungs and can lead to breathing problems during and after your surgery. You will recover faster if you don't smoke, so consider taking this opportunity to quit. We recommend quitting at least two weeks prior to anesthesia to minimize complications. Be sure to share your smoking habits with your surgeon and anesthesiologist.

Marijuana Use

Marijuana has a sedative effect and can interact negatively with anesthesia. Marijuana use also increases the risk of post-operative pain. Do not use marijuana the day of your procedure, and be sure to share your marijuana use with your surgeon and anesthesiologist.

Illicit Drug Use

The use of illicit drugs increases your risk of complications and also increases the chances that your surgery or procedure will be canceled. Stop using illicit drugs at least 1 week prior to your surgery.

Alcohol Use

More than two alcoholic beverages a day can increase your risk of side effects from anesthesia as well as the amount of anesthesia you need. Be honest with your surgeon and anesthesiologist about your alcohol use. They may ask you to abstain before surgery.

Sleep Apnea

Sleep apnea increases the risk of side effects from anesthesia because it slows down breathing. It can also make it more difficult for you to regain consciousness after surgery. If you have sleep apnea, tell your surgeon and your anesthesiologist.

Strokes

If you have experienced a stroke or heat stroke, or have a family history of stroke or heat stroke, share this information with your surgeon and anesthesiologist.

Previous Reaction to Anesthesia

If you've ever had an adverse reaction to anesthesia, let your surgeon and anesthesiologist know. Your anesthetic plan will be tailored to prevent a recurrence.

Chronic Health Issues

Tell your surgeon and anesthesiologist about any and all chronic conditions you have such as allergies, asthma, heart disease, high blood pressure, diabetes, liver or kidney disease, obesity, and seizure or other neurological disorders.

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