



## ANESTHESIA INFORMATION AND CONSENT

Dear patient, dear patient

You are scheduled to undergo anesthesia in the near future. This information sheet is intended to help you prepare for your personal consultation with the anesthetist. The anesthesia procedure that is most suitable for the planned procedure and least stressful for you will be determined together with you. The safety of all anesthesia procedures is very high today and all vital bodily functions such as cardiac activity, circulatory and respiratory function are monitored seamlessly. However, we feel obliged to inform you of the following risks, including very rare ones.

### GENERAL ANESTHESIA RISKS

The risk of life-threatening incidents such as respiratory and circulatory arrest is extremely low. Allergic reactions and nerve damage are also very rare. Unpleasant symptoms that may occur after anesthesia, but do not last long, include nausea and vomiting, shivering, feeling cold, itching, bruising, back pain or headaches and difficulty urinating. Additional risks are possible if special measures have to be carried out. These include the insertion of vascular catheters into blood vessels or the administration of blood and blood components (blood transfusion).

### GENERAL ANESTHESIA (GENERAL ANESTHESIA)

General anesthesia is used to switch off the sensation of pain and consciousness with various medications until the procedure is complete. In most cases, breathing must be artificially supported, but you will not feel anything. General anesthesia is a very safe method, which is why it is used very frequently.

**Special risks:** Hoarseness, difficulty swallowing, aspiration, vocal cord injury, dental damage, especially of already damaged teeth, being awake during anesthesia (very rare).

### REGIONAL ANESTHESIA (PARTIAL ANESTHESIA)

For certain operations, it is possible to make only the affected part of the body insensitive to pain. You may be awake during such regional or conduction anesthesia. If regional anesthesia is not effective enough, painkillers can be added at any time or a general anesthetic can be used. The most important regional procedures are

#### Anesthesia close to the spinal cord (spinal/peridural anesthesia)

A local anesthetic (local anesthetic) is injected either into the cerebrospinal fluid that flows around the spinal cord (spinal anesthesia) or into the gap between the spinal cord and the spinal canal (epidural or peridural anesthesia). For a certain period of time, the areas thus numbed first become warm, then numb and can no longer be moved.

**Special risks:** headaches, temporary drop in blood pressure with nausea, urinary retention. Serious complications such as impaired hearing and vision, nerve injuries, nerve paralysis or even paraplegia are extremely rare.

#### Peripheral nerve blocks (conduction anesthesia, infiltration anesthesia)

These are anesthetizations of individual or several nerves with a local anesthetic, for example for arm and hand operations. A ultrasound device is used to prevent nerve injury during plexus anesthesia.

**Special risks:** Vascular injury, bruising, allergic reactions, cramps, nerve damage.

#### Intravenous regional anesthesia (IV block)

The arm is made insensitive by injecting local anesthetic into a vein in the arm that is tied off with a pressure cuff on the upper arm. As with all regional anesthesia, the areas made pain-free by this first become warm for a certain period of time, then numb and can no longer be moved.

#### Local anesthesia (LA)

Local anesthesia is usually administered by the surgeon. Only the area where the incision and the procedure will take place is anesthetized. When the local anesthetic is injected, there may be a brief burning sensation, but after a short time the area is numb. If required or desired, LA can be combined with sedation.

#### SEDATION, TWILIGHT SLEEP

Reduced cognition due to medication, which can lead to superficial sleep and possibly can lead to a "memory gap".

**Special risks:** Respiratory depression, aspiration.

#### AFTER THE OPERATION

There are various medications available for pain relief after operations, which we administer in stages according to individual needs. You will receive clear instructions on pain therapy before you leave and will be given the necessary information on where to contact if you have any questions or problems.

#### FOR YOUR SAFETY

- You must be sober for the anesthesia. This means:  
**FOOD IS PERMITTED UP TO 6 HOURS BEFORE ADMISSION TO THE DAY CLINIC**  
**Drinking clear liquids is permitted up to 2 hours before admission to the day clinic**  
(only clear liquids such as tea without milk, black coffee or still water).  
Please adhere strictly to the instructions; otherwise the operation will have to be canceled.
- Take all medication on the day of the operation. **However, diabetic medication should be discontinued.**
- Leave your jewelry and valuables at home.
- If you wear contact lenses, it is better not to insert them but to wear your glasses.

As soon as you have recovered from the anesthesia and feel well, you will be discharged home. You will need to be taken home by someone to accompany you. It is a good idea if you are not alone on the day of the operation and have organized assistance.

They are not allowed to drive independently or make any important decisions until the next morning.

If you have any questions, please write them down below so that they can be discussed with the anesthesiologist.

Your questions:

#### DECLARATION OF CONSENT

I have discussed the anesthesia procedure, including its risks, with the anesthesiologist and consent to the anesthesiological treatment. I agree that my data may be stored electronically and processed in accordance with the statutory provisions.

Date, place

Patient

Anesthesiologist

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**PLEASE TAKE THIS FORM WITH YOU WHEN YOU ENTER THE DAY CLINIC!**