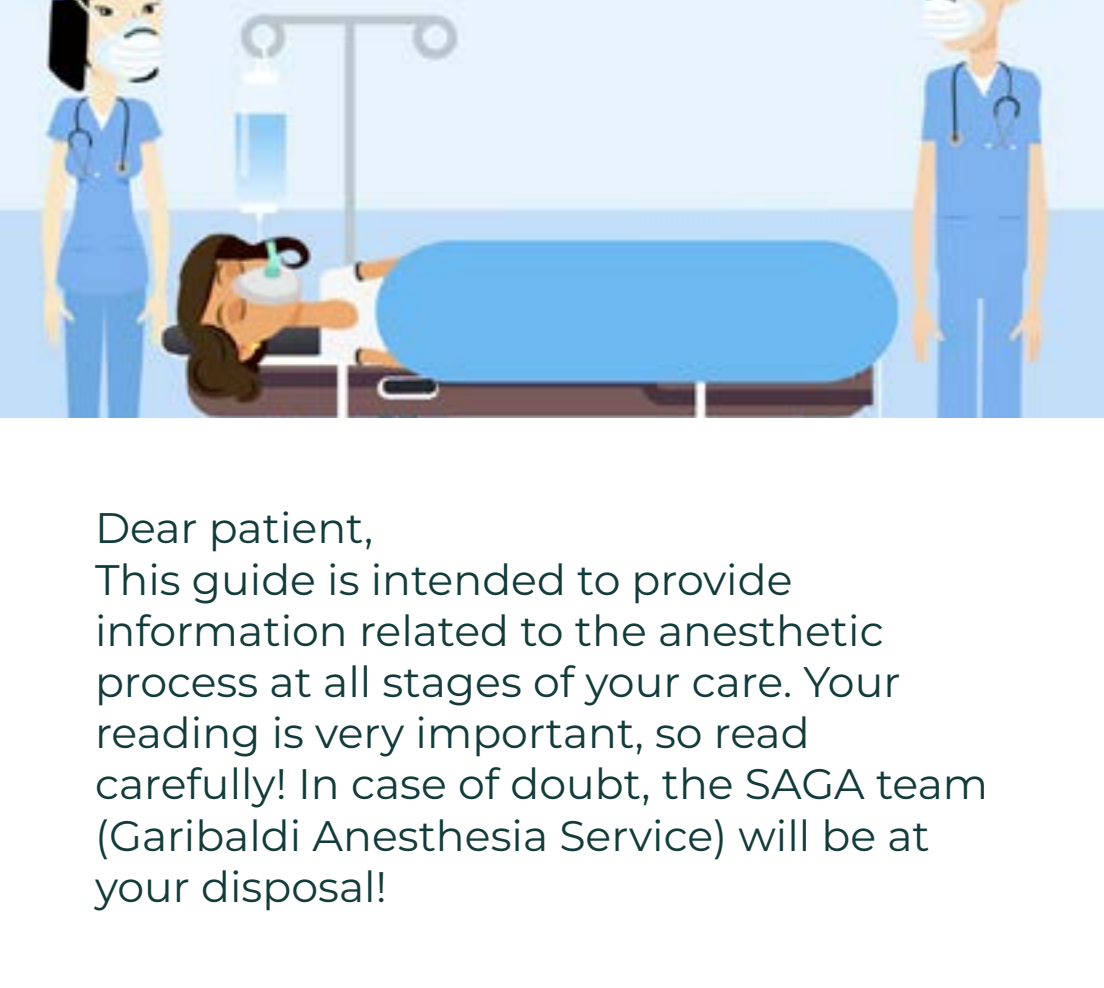


PATIENT GUIDE ANESTHESIA



Dear patient,
This guide is intended to provide information related to the anesthetic process at all stages of your care. Your reading is very important, so read carefully! In case of doubt, the SAGA team (Garibaldi Anesthesia Service) will be at your disposal!


Patient Journey

What to expect

What is anesthesia? 

Pre-anesthetic consultation 

Types of anesthesia 

Postoperative analgesia 

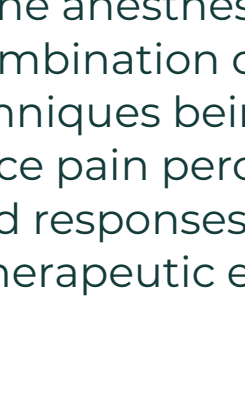
Before the procedure 

The day of the procedure 

Post-anesthetic guidelines 

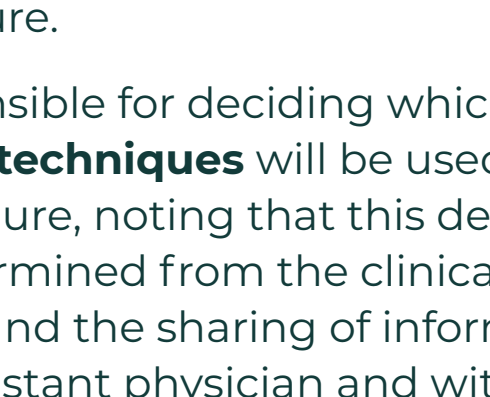
Contact 

What is anesthesia?



Anesthesia is a medical procedure, performed by the anesthesiologist, through the combination of drugs and specialized techniques being able to abolish or reduce pain perception and other unwanted responses during surgery, diagnostic or therapeutic examination.

Who is the anesthesiologist?



An anesthesiologist is a medical professional with specialized training in anesthesiology who has a certified qualification to perform anesthesia. In this way, it will provide you with **safety, comfort** and the greatest care throughout the procedure.

He is responsible for deciding which **anesthetic techniques** will be used in your procedure, noting that this decision will be determined from the clinical evaluation and the sharing of information with his assistant physician and with you, the patient.

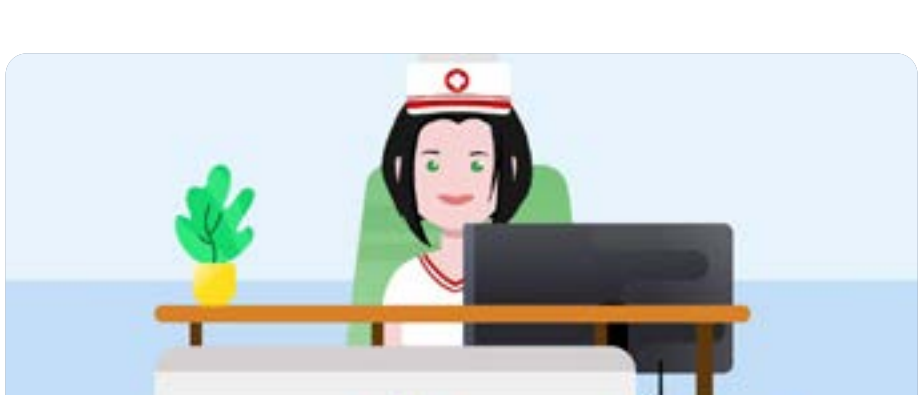


When will the appointment with the anesthesiologist be scheduled?

Once your surgery or procedure is scheduled, you will receive a phone call from the Garibaldi Anesthesiology Service (SAGA) to schedule your pre-anesthetic appointment.

You will receive a text message confirming the location, date and time of your appointment, as well as this Patient Guide and the [link to our website](#) where you can find more guidance and explanatory videos about the anesthesia process.

What will the Pre-Anesthetic Consultation be like?



Before going to the pre-anesthetic consultation, it is important that you know which procedure you are going to perform and why you are performing this procedure.

Talk to your treating physician to clarify any doubts. If the information is very complex and you have a friend or family member who can help, ask them to accompany you during the consultation.

Arrive at the informed place, 30 minutes before the scheduled time, with your preoperative exams, a list of your regularly used medications, medical reports or opinions, and other requests by your assistant physician..

This service will be divided into two stages: a consultation with a nurse and a consultation with an anesthesiologist.

Consultation with Nurse

This will be the time for nurses to know a little more about your health history. **Several questions will be asked regarding pre-existing diseases, recent surgeries, allergies, medications in use, life and social habits.**

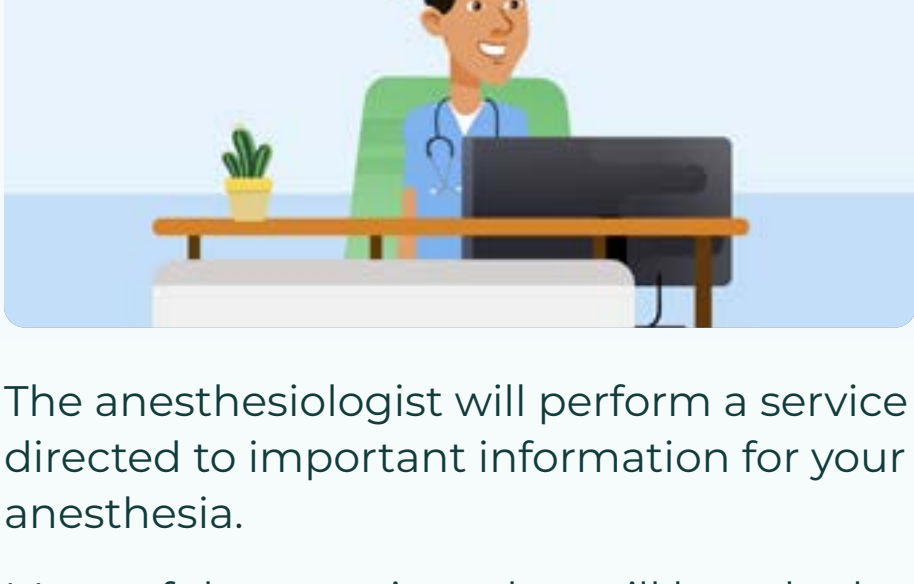
It is essential that no information is omitted during the consultation. We advise you to bring all this information down with you.

During this consultation, your vital signs (blood pressure and heart rate) and anthropometric data (weight and height) will be checked.

At the end of the service, guidelines will be provided regarding the **time of arrival for hospitalization**, presence of a companion, fasting, use of adornments, prostheses and specific preoperative preparation, according to the procedure.

To ensure understanding and compliance with the guidelines, **you will receive a leaflet with all the information that was passed verbally.**

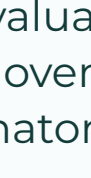
Consultation with the Anesthesiologist



The anesthesiologist will perform a service directed to important information for your anesthesia.

Many of the questions that will be asked may seem redundant or repetitive, since they will be asked by several professionals throughout your care, from the moment of your first appointment until the moment of the procedure.

This flow of repetitions and confirmations serves **to ensure that all information is correct and to increase your security.**

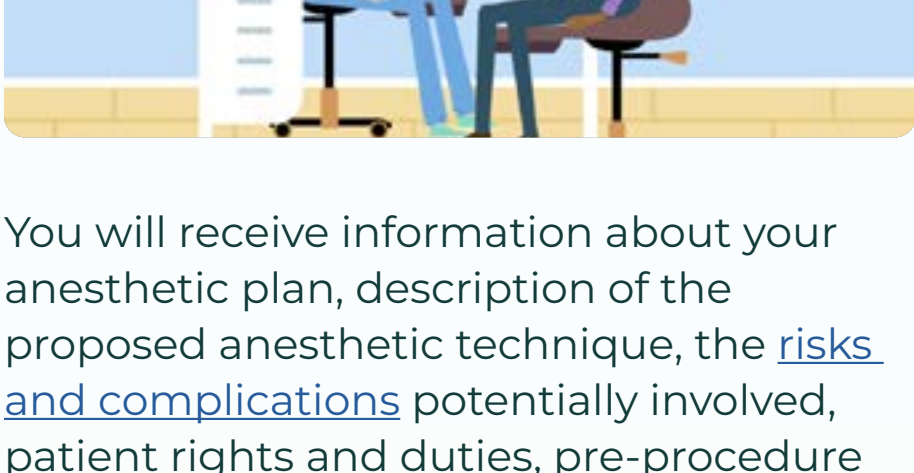


The information that has already been registered needs to be confirmed at all stages of the service.

During this consultation, a physical examination will be performed aimed at evaluating the airway (observing neck movements and mouth opening for anatomical visualization) and vital signs.

Preoperative exams will be requested for evaluation during the pre-anesthetic consultation. Medical reports, expert opinions may also be requested at this time.

Through this detailed evaluation, it is possible to predict the anesthetic assistance that will be necessary during your procedure and, together with you, outline the best anesthetic strategy, **ensuring you comfort and safety.**

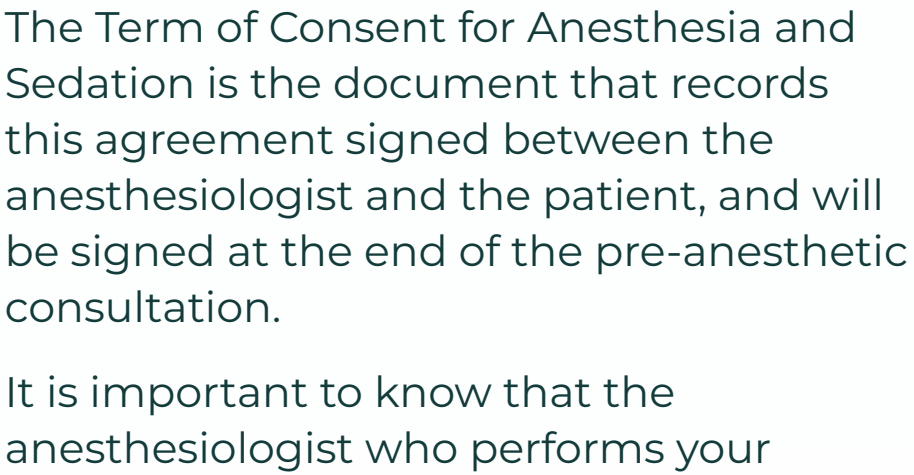


You will receive information about your anesthetic plan, description of the proposed anesthetic technique, the risks and complications potentially involved, patient rights and duties, pre-procedure fasting, continuity or suspension of medication, physical activity, consumption of alcohol, cigarettes or other substances.



At this moment, you will have the opportunity to solve all your doubts. Enjoy!

Term of Consent



The Term of Consent for Anesthesia and Sedation is the document that records this agreement signed between the anesthesiologist and the patient, and will be signed at the end of the pre-anesthetic consultation.

It is important to know that the anesthesiologist who performs your consultation may not be the same professional who will perform your anesthesia.

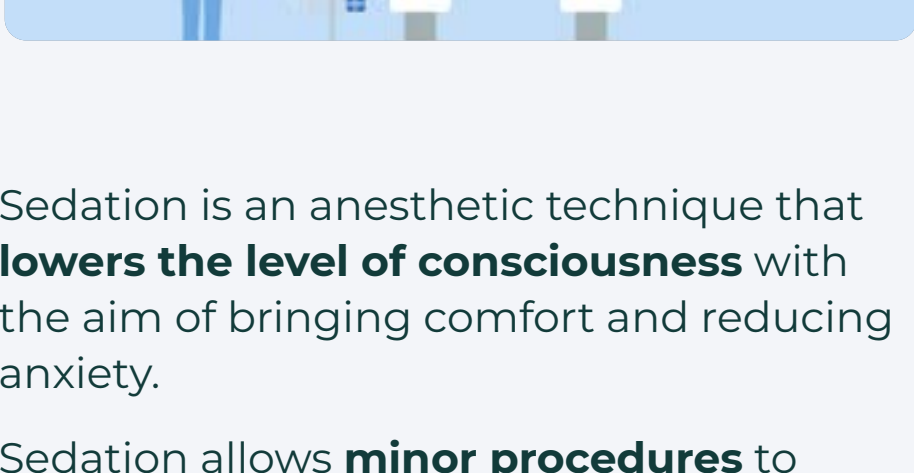


In case of inability to perform the procedure, you will receive clear explanations about the reason for this decision and will receive guidance on the next steps to be taken.

Types of Anesthesia

1

Sedation



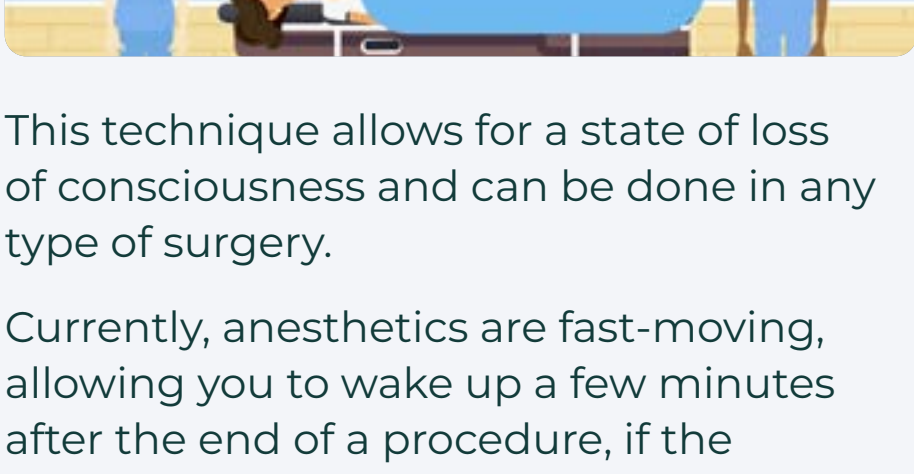
Sedation is an anesthetic technique that **lowers the level of consciousness** with the aim of bringing comfort and reducing anxiety.

Sedation allows **minor procedures** to be performed that would normally be cumbersome to be performed with the patient fully alert.

Sedation can range from mild (patient conscious but not anxious) to deep (patient in deep sleep, only aroused by painful stimuli). Whenever possible, it will be associated with local anesthesia for better pain control.

2

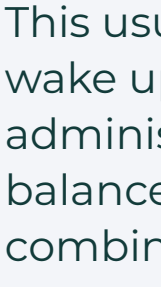
General Anesthesia



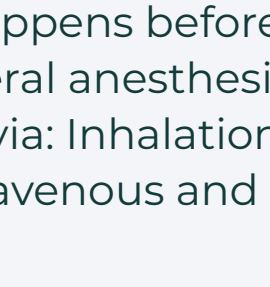
This technique allows for a state of loss of consciousness and can be done in any type of surgery.

Currently, anesthetics are fast-moving, allowing you to wake up a few minutes after the end of a procedure, if the particularities of the surgery allow.

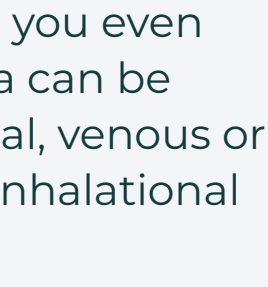
Patients undergoing general anesthesia will need assistance with breathing, either with a face mask, laryngeal mask, or through tracheal intubation.



Máscara Facial



Máscara Laríngea

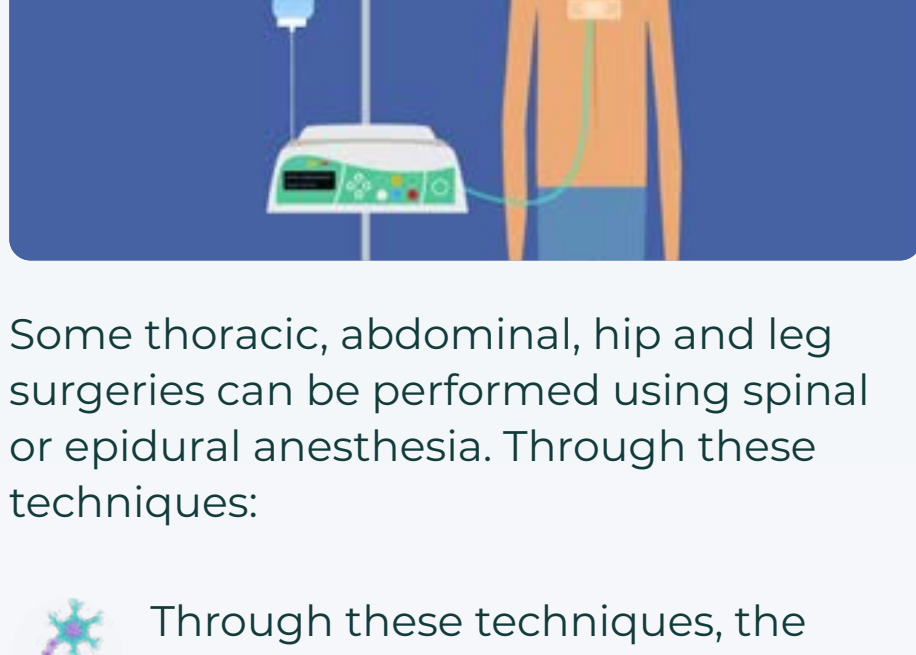


Intubação Traqueal

Whatever the device, as soon as it is no longer needed, it will be taken away.

This usually happens before you even wake up. General anesthesia can be administered via: Inhalational, venous or balanced (intravenous and inhalational combined).

3 Blocks in the Column



Some thoracic, abdominal, hip and leg surgeries can be performed using spinal or epidural anesthesia. Through these techniques:



Through these techniques, the nerves remain anesthetized for a period of time, preventing the transmission of painful stimuli and making you not feel or move your legs, especially in spinal anesthesia.



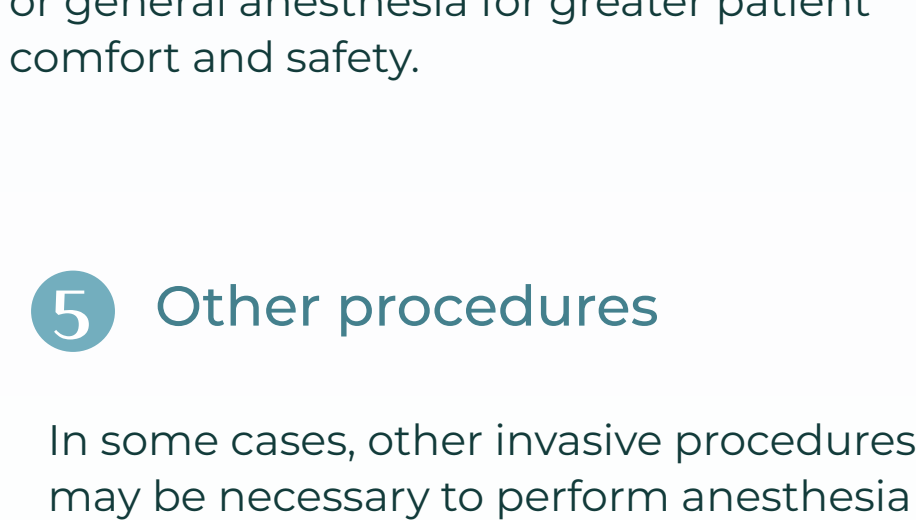
To provide greater comfort and safety to the patient, these techniques are usually associated with sedation or general anesthesia.

Blocks in the Column can also be used to treat postoperative pain, either with long-acting anesthetics or analgesia controlled by yourself through a catheter.



Despite the many stigmas involved, **blocks in the column is a safe**, effective and very important technique for anesthetic management.

4 Peripheral blocks



This technique aims to **anesthetize a specific region of the body**, by injecting local anesthetic around specific nerves.

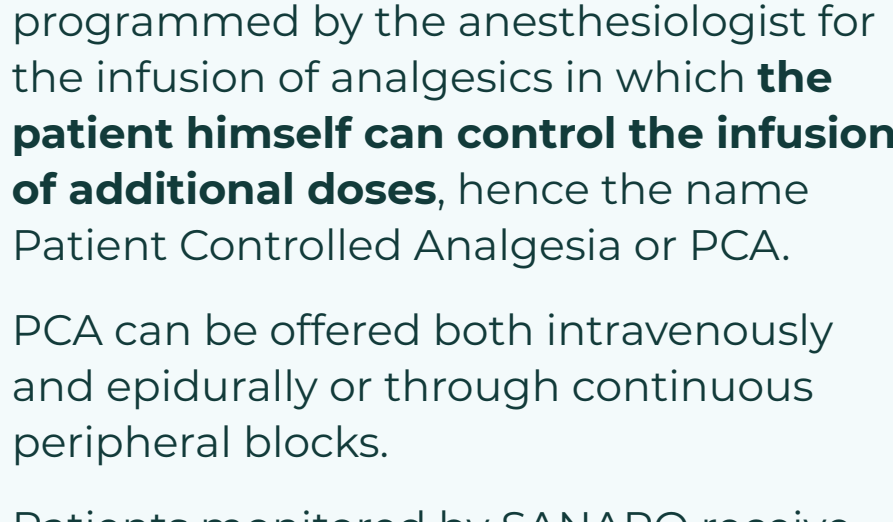
This technique is very useful to ensure that the patient remains pain free even after the surgery is finished.

They can also be combined with sedation or general anesthesia for greater patient comfort and safety.

5 Other procedures

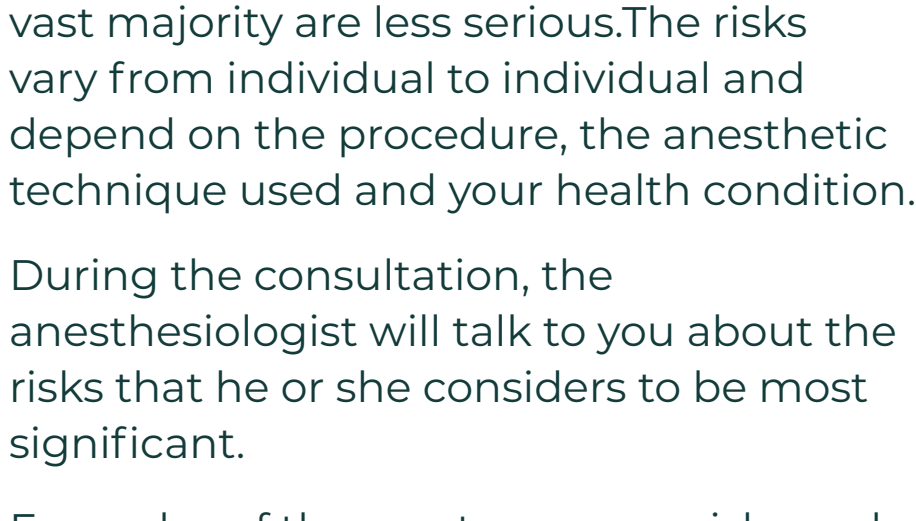
In some cases, other invasive procedures may be necessary to perform anesthesia and its monitoring, among them are the insertion of a central venous catheter, arterial puncture to measure invasive pressure, gastric tube.

Continuous Postoperative Analgesia



Some surgical procedures are associated with a higher probability of severe postoperative pain, which may require specific analgesic techniques, with analgesia for a longer time, extending for a few days after surgery.

What is SANAPO?



SANAPO -Postoperative Acute Analgesia Service was created in order to **provide quality treatment to patients in the postoperative period** of surgeries with high pain potential.

For the control of acute postoperative pain, in addition to the usual venous analgesic drugs, we use a device pre-programmed by the anesthesiologist for the infusion of analgesics in which **the patient himself can control the infusion of additional doses**, hence the name Patient Controlled Analgesia or PCA.

PCA can be offered both intravenously and epidurally or through continuous peripheral blocks.

Patients monitored by SANAPO receive a daily visit from an anesthesiologist who will seek to optimize pain control, facilitating the patient's recovery and making the experience more pleasant.

Risks and complications

Like everything we do in our daily lives, anesthesia also involves risks, but the vast majority are less serious. The risks vary from individual to individual and depend on the procedure, the anesthetic technique used and your health condition.

During the consultation, the anesthesiologist will talk to you about the risks that he or she considers to be most significant.

Examples of the most common risks and adverse events include nausea, tremors, thirst, sore throat, small bruises and temporary memory loss, especially over the age of 60.

For more information on risks and complications, visit our website. (www.saganestesia.com.br)

Talk to the anesthesiologist and clear all your doubts on the day of your pre-anesthetic consultation.

Fast

After a normal diet, our stomach may **need up to 8 hours** approximately to be empty. The anesthetic-surgical procedure can induce vomiting and with the patient anesthetized, this content can reach the airways and lungs causing serious complications such as aspiration pneumonia. Not following the fasting guidelines correctly can have consequences such as postponing your procedure or putting your life at risk.

Mandatory fasting is 8 hours for solid foods (including milk, yogurt, juice with residue, soup) and 2 hours for water and isotonic drinks.

Mandatory fasting is 8 hours for solid foods (including milk, yogurt, juice with residue, soup) and 2 hours for water and isotonic drinks.

Avoid prolonged fasts, it is not necessary to fast for longer than indicated above.

Post-anesthetic guidelines



The effects of anesthesia may last for a few hours after the procedure is completed. You may have residual anesthetic effect, sometimes barely noticeable, but which can compromise some body functions, so it is very important to follow the guidelines below.

During the 24 hours

After the surgical or diagnostic procedure

Avoid activities that involve:



Concentration/memory: Driving vehicles, conducting banking transactions, financial negotiations or making important decisions.



Compromising your physical integrity: sports, use household objects such as scissors or knife, cook, consume alcoholic beverages, smoke or use some type of psychoactive substance.

In some cases, you can be discharged with a limb (arm or leg) under the effect of motor and sensory block. Keep care and avoid walking barefoot, handling heated or sharp objects, as you could get hurt and not realize it.

If the procedure was performed under spinal anesthesia, although very rare, you may have a typical headache that increases when sitting or standing, and decreases when lying down. In this case, please contact us, there is a suitable treatment.

At the time of hospital discharge, you must be with a companion of legal age.

Because it is a medical procedure, anesthesia involves some risks, and although rare, can lead to complications and side effects with different levels of gravity.

This is a general guide, there may be individual and specific. Some patients who will require approaches and recommendations not covered in this document.

We wish you an excellent procedure / surgery, we will be together during this process ensuring safety and reception!



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