

Department of Anesthesia

Title:
Consent for Procedures

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Attachment:
A - Consent Form

POLICY:

Consent for anesthesia is obtained after the patient has been informed of the risks, benefits and alternatives during the preoperative evaluation and preparation of the patient.

PROCEDURE:

Consent for the surgical procedure is documented on CONSENT FOR SURGERY, ANESTHETICS, AND OTHER MEDICAL SERVICES (MR 070.070),

The recognized risks, benefits and alternatives to anesthesia have been established by the Department of Anesthesia and may be explained to the patient in advance by a nurse practitioner, SRNA, CRNA, resident or attending anesthesiologist. (See Department guidelines on risks, benefits and alternatives.

Where the anesthesia represents the sole major risk accompanying a procedure, such as anesthesia for a pediatric MRI scan, the anesthesiologist will get the written consent for "Anesthesia for {Diagnostic Procedure}" with the anesthesiologist listed as the physician under whose direction the procedure will be performed and who described the nature of the procedure (See CONSENT FOR SURGERY, ANESTHETICS, AND OTHER MEDICAL SERVICES (MR 070.070),

The attending anesthesiologist will perform the FINAL ATTENDING EVALUATION on the Anesthesia Consultation and Procedures form (MR72-0880010) and at that time again document the informed consent to the anesthetic plan for identification of the risks, benefits and alternatives/options.

Patient Information for Anesthesia

Types of Anesthesia

There are several ways to administer anesthesia; the anesthetic choice is related to your general condition and medical history as well as the surgery or procedure being done. *Local Anesthesia* can provide loss of pain sensation over the area where surgery is performed and may be combined with sedation to induce a light sleep. *Regional Anesthesia* (nerve blocks, epidural, spinal) means injection of medicine (local anesthetic) through a small needle to "numb" specific areas of the body. With both of these techniques, sedation may be added. *General Anesthesia* uses medicines (generally propofol or sodium pentothal-like drugs) to put you deeply asleep, and gases (e.g. oxygen, nitrous oxide, isoflurane, desflurane, sevoflurane) to keep you asleep. With this technique, we will often use medicines to relax muscles and techniques that support your breathing. Some operations can only be performed under *General Anesthesia*, others can be done with *local, regional or general anesthesia*. An anesthesiologist will discuss these techniques and explain the anesthetic options to you.

Complications and Risks

Any anesthetic is a serious event. Occasionally, anesthesia may be associated with the occurrence of nausea, vomiting, dizziness, drowsiness, headache, depression, numbness, dental damage, sore throat, urinary retention, and changes in smell and taste for a brief time. You should not engage in activities (e.g. driving) requiring unimpaired physical and mental ability for at least 24 hours. The probability of significant harm from anesthesia is minimal; nevertheless, there are potential risks, e.g. : long term adverse effects to any part of the body (organs, nerves, eyes, bones, teeth, blood vessels); infection; breathing problems; awareness; unexpected reaction to drugs; serious rapid increase in body temperature; failure to recover from anesthesia, including death. The effects of anesthesia on the fetus during early pregnancy are not completely understood; if you could be pregnant please tell your anesthesiologist.

Anesthesiologists and Certified Registered Nurse Anesthetists

The Anesthesiology Department at MedStar Georgetown University Hospital is made up of anesthesiologists, resident physicians in training, certified registered nurse anesthetists, student registered nurse anesthetists and nurse practitioners. Your anesthesia care team will be headed by an attending anesthesiologist who will be working in conjunction with and supervising a nurse anesthetist or resident physician.

Understanding and Consent

The nature of these anesthetics, the way they are given, alternative anesthetics, the procedures performed in connection with anesthesia, and the possible risks and complications will be explained to you by a member of the Anesthesia Department. An attending anesthesiologist will meet with you immediately before your surgery and go over any last minute questions or concerns. At any time, the anticipated anesthetic plan for your surgery or procedure will be outlined and any additional questions answered.

Russell T. Wall, MD
Chief of Service, Anesthesia