

Anesthesia and You

What is anesthesia?

The word anesthesia means "without feeling". It is a state of painlessness caused by drugs (anesthetics) which block the pain and feeling impulses to the brain.

There are two types of anesthesia:

- **General anesthesia** makes the whole body lose feeling, movement, and consciousness.
- **Regional anesthesia** numbs only the part of your body that will be having surgery. Feeling is numbed by temporarily blocking nerves near the site of the surgery or at the spinal column (your back). You will be awake but will feel no pain.

Who gives anesthesia?

Your anesthesia team consists of an anesthesiologist and a nurse anesthetist. An anesthesiologist is a doctor with special training in anesthesia. A nurse anesthetist is a nurse who has had special training to become a certified registered nurse anesthetist (CRNA). They work together to give you anesthesia. They also watch your pulse, breathing, blood pressure and oxygen levels during the operation.

What happens before surgery?

A member of the anesthesia team will talk to you before your surgery. S/he will ask you some questions and review your medical record. Be sure to ask any questions you have about anesthesia. After talking to you, the anesthesia team will decide on the best type of anesthesia for your surgery.

Your doctor may order blood tests, an electrocardiogram (EKG), or x-rays. These tests help show how you will respond to anesthesia.

You must not eat or drink anything, even water, after midnight the night before surgery. If you do, your surgery will be delayed or even cancelled for your own safety. If your doctor wants you to take some of your medications the morning of surgery you may take them with a *sip* of water.

What happens when I go to surgery?

An escort will take you to the holding area, near the operating room, about half an hour to an hour before your surgery. Your family can walk with you as far as the waiting room atrium.

A nurse will check your pulse, breathing, and blood pressure. If you do not already have an intravenous (IV) line one will be put in. This is a small plastic tube that is put into a vein. It is used to give you fluids and medications during surgery. You will be taken to the operating room as soon as it is ready.

The operating room has bright lights and may feel very cool. You will see several pieces of monitoring equipment. The staff will tell you about them.

What happens during surgery?

If you are having general anesthesia you will probably be given both IV and inhaled (a gas that you breathe) drugs. These drugs will make you comfortable and reduce the risk of side effects. A tube is placed in your windpipe to help you breathe after you are asleep.

If you are having a regional anesthesia you may be given a sedative to help you relax. In fact, you may fall asleep and wake up with no memory of the operation. If you stay awake, you won't be able to see the surgery because sterile drapes cover the area.

What happens after surgery?

When the operation is over, you will be taken to the Post Anesthesia Care Unit (PACU). There you will be closely watched by a nurse. S/he will check your breathing, pulse, and blood pressure, as your anesthesia wears off. You should start doing your deep breathing and coughing exercises. Tell the nurse if you are having any pain. Medication can be given to make you more comfortable. You will stay in this area for at *least* one hour.

When the anesthesiologist, or his/her designee, decides that you are ready to leave the unit, you will be taken back to your room or back to the outpatient area, depending on the arrangements that were made by you and your doctor before surgery. You will be able to see your family again at this point. Your doctor will probably have spoken to your family by this time.

The medications you were given during surgery can stay in your body for up to 24 hours. You will not be "your old self" until the anesthetic has left your body.

After surgery, you should continue to do your deep breathing and coughing exercises. They help your body recover. Your doctor will leave orders about your activity level. Remember to ask for pain medication when you need it. This will help you do your exercises and become more active.

After surgery and anesthesia, the stomach is not always able to digest food right away. Your nurse will listen to your stomach with a stethoscope and decide when you are ready to eat the diet your doctor ordered.

If you had a regional anesthesia that numbed the lower part of your body (a “spinal”), you will need to have someone help you the first time you get out of bed. In the past, people were told to lay flat for several hours after a spinal. But because of improved methods, that is no longer necessary. You may raise the head of your bed to a comfortable level.

Knowing what to expect can help you prepare for your surgery and anesthesia. If you have any questions after reading this pamphlet be sure to ask your doctor or nurse.

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