

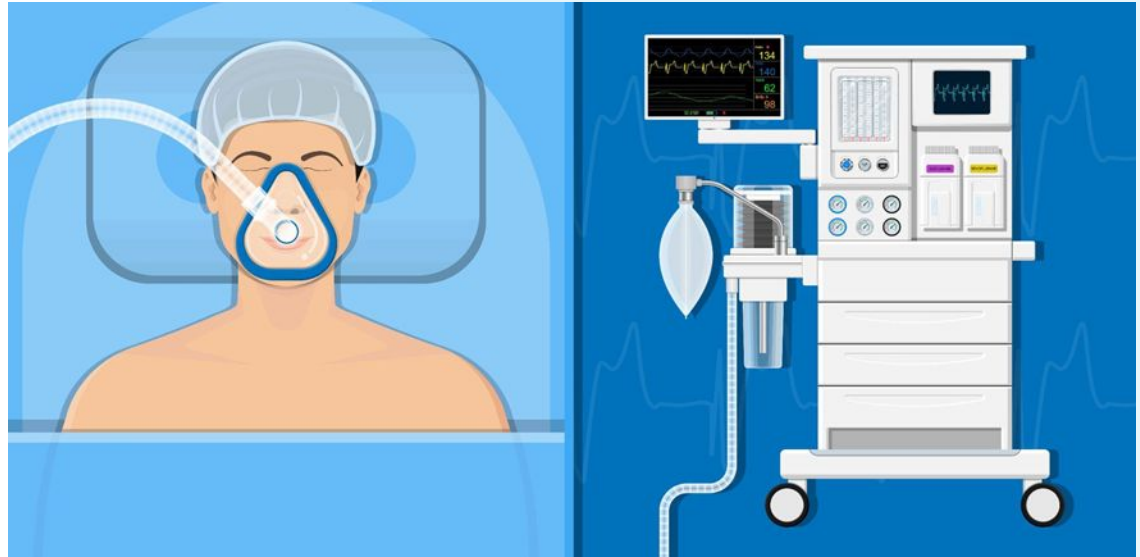
An illustration of a surgeon in an operating room. The surgeon is wearing a dark blue scrub cap, glasses, and a white surgical mask. He is wearing light blue scrubs. In the background, there is a surgical table with a blue cushion, a large circular surgical light fixture, and a computer monitor on a stand. The background is a light teal color with a window grid pattern.

Introduction to General Anaesthesia



What is General Anaesthesia? (1)

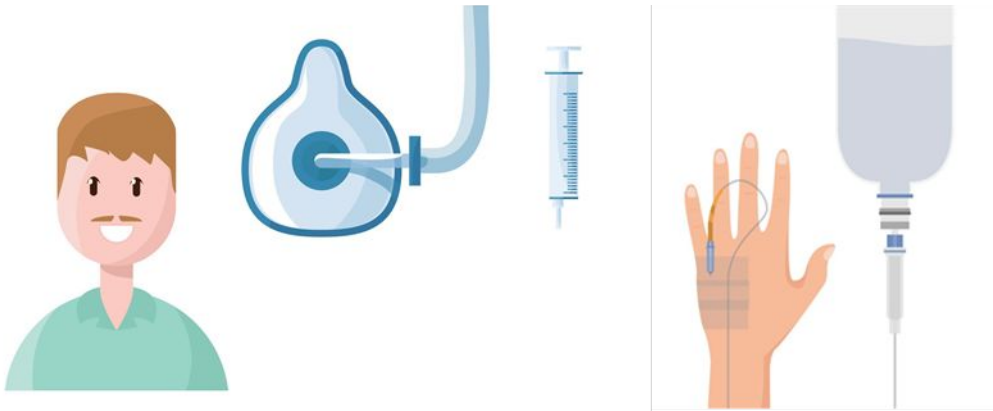
General Anaesthesia is a carefully monitored state of drug induced, reversible unconsciousness.

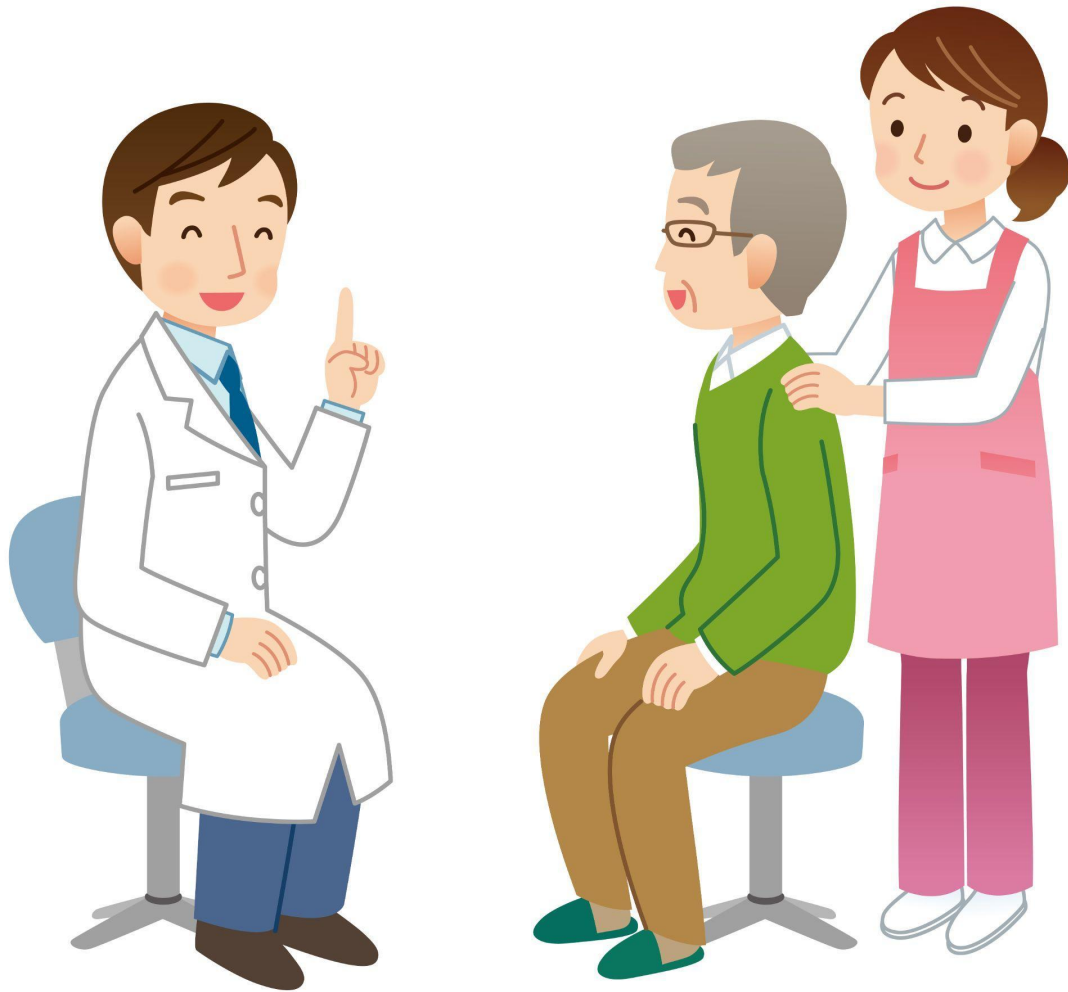




What is General Anaesthesia? (2)

General Anaesthesia is achieved by giving intravenous anaesthetic drugs, anaesthetic gases or a combination of both. Your consciousness will return shortly after stopping the anaesthetic at the end of your operation.





Pre-Anaesthetic Assessment



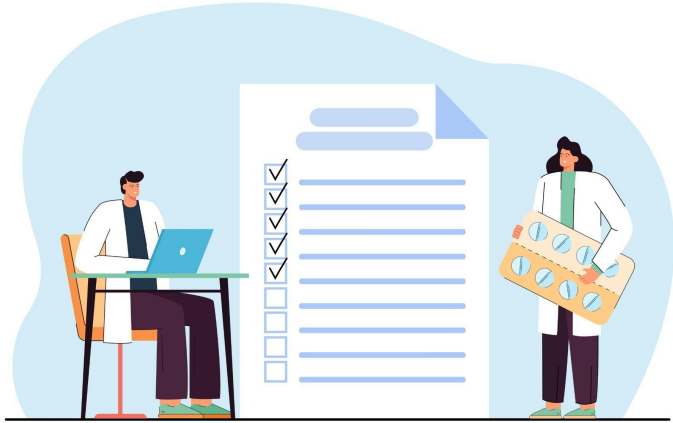
Anaesthetists will perform the following during an assessment (1)



- Assess your medical, surgical, anaesthetic, allergy, and drug history;
- Enquire your smoking or drinking habits;
- Perform a physical examination;



Anaesthetists will perform the following during an assessment (2)



- Review your investigation results;
- Discuss the plan for your anaesthesia;
- Suggest pre-anaesthetic preparations; and
- Obtain your informed consent.

To improve safety before anaesthesia, you should



Stop smoking for as long as possible;

- Stop herbal medicine for at least two weeks before the operation;
- See a dentist for treatments if you have loose teeth or crowns;
- Stop or continue medication according to advice from your anaesthetist.





Fasting before operation

- No eating is allowed before operation to prevent aspiration of food or liquid into your lungs during anaesthesia. This is known as “**fasting**”.





How long is fasting needed before the operation?



At least 6 hours before the operation

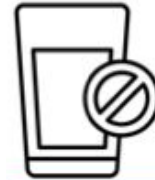
When should I stop eating?

Please follow the instructions from the hospital. In general,

- For operations in the following **morning**
- Fasting starts from **midnight**.
- Drinking water is allowed until 2 hours before the operation.



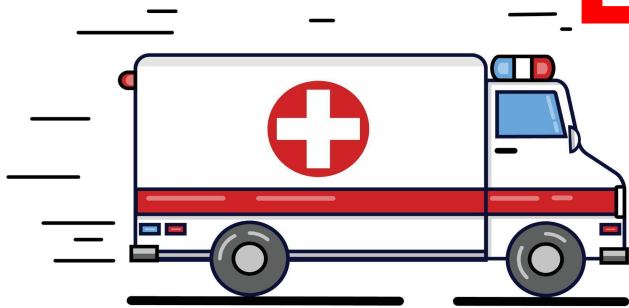
- For operations in the **afternoon**
- Fasting starts from 7 a.m. of the same day.
- Drinking water is allowed until 2 hours before the operation.



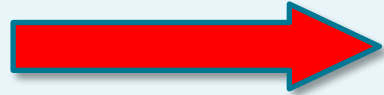


Emergency operations

- If you need an emergency operation, special anaesthetic techniques would be used to reduce the risk of aspiration



EMERGENCY



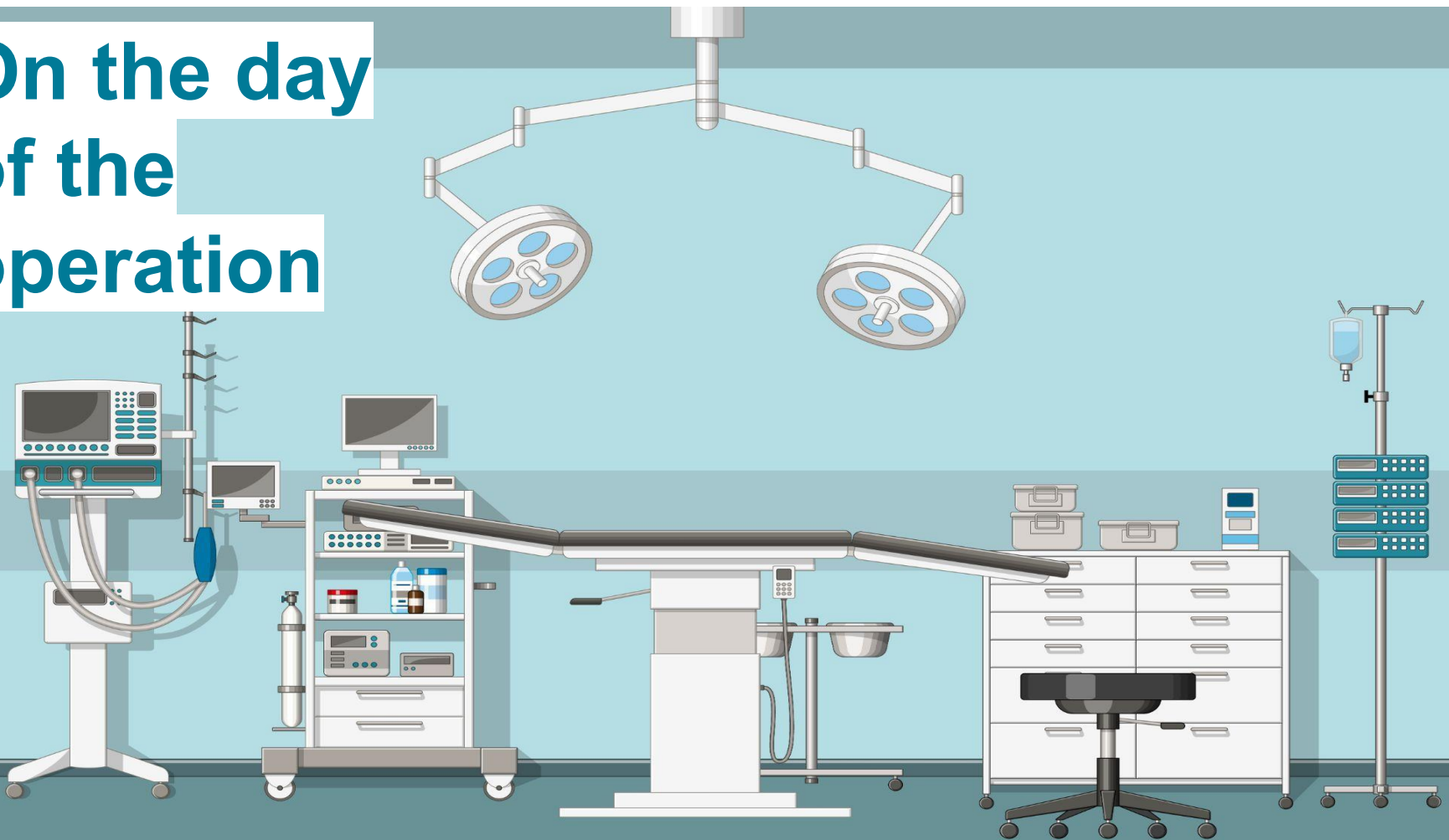


What should I do if I feel unwell on the day of my operation?



- Please inform the hospital if you feel unwell on the day of your operation. In order to reduce unnecessary risks, your operation may need to be postponed until you get better.

On the day of the operation





What would happen when I am inside the operating theatre? (1)

In the operating theatre, your anaesthetist(s), surgeon(s) and operation nursing staff will check on the following to ensure you are the right patient, and your planned surgery and anaesthesia are correct.

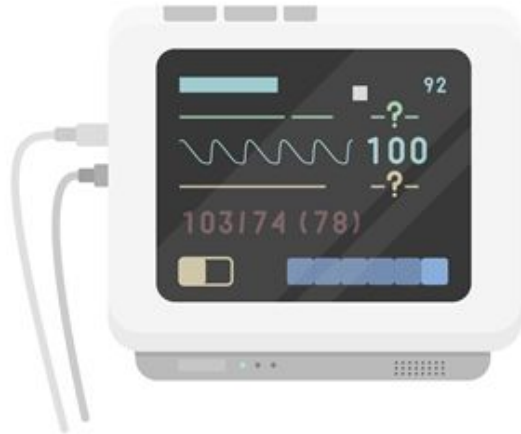
- your identity,
- the type of operation,
- the site of operation and
- the type of anaesthesia for the operation.



This final verification process is called the “**Time Out**”.



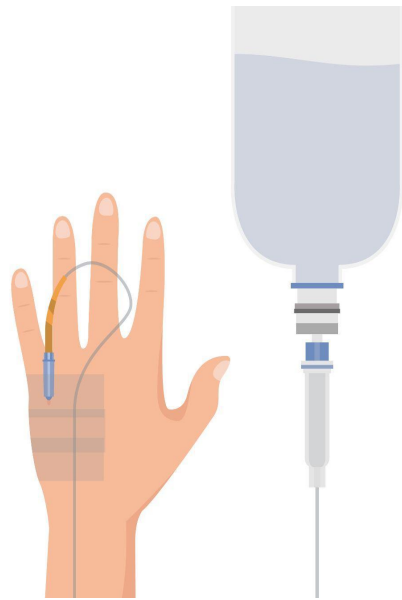
What would happen when I am inside the operating theatre? (2)



Various monitors will be attached to you, depends on your medical condition and the type of operation, to ensure your maximum safety.



What would happen when I am inside the operating theatre? (3)



Your anaesthetist will insert a plastic catheter/tubing into your vein and inject medications including anaesthetic medications.



How is general anaesthesia being done?



You will lose consciousness after intravenous anaesthetic medications. As part of your anaesthetics, the anaesthetist may control your airway and breathing, either by inserting a plastic tube (endotracheal tube) or other alternative equipment, to ensure adequacy of breathing.



Is it safe when I lost my consciousness?



Your anaesthetist(s) will stay with you at all times to give you anaesthesia, analgesia medications, monitor your vital signs, give you treatment as necessary to ensure your safety.

After the operation





What will happen to me after the operation?

- As soon as the operation finishes, anaesthetic medications will be stopped and you will regain consciousness. You will be monitored for recovery before returning to the ward.
- Depending on the clinical conditions, some patients (for example after major operations) may need to be kept asleep and ventilated with the help of a machine.





Will I feel a lot of pain after the operation?



- You will be given pain relieving medications (analgesics) during your operation and whenever necessary in the recovery room.
- The anaesthetist will discuss with you during the pre-anaesthetic assessment if special pain relief methods can be considered, including
 - Local anaesthetic and regional blocks
 - Epidural analgesia
 - Patient controlled analgesia



Are there risks of general anaesthesia?(1)



In general, modern anaesthesia is very safe and the risk of death directly associated with general anaesthesia itself is very small.

The surgical procedure may incur certain risks and these should be discussed with you by the surgeon.

The side effects and complications associated with general anaesthesia can be divided into those that are very common, common, uncommon, rare and very rare.



Are there risks of general anaesthesia?(2)

• **Very common (1 in 10) and common (1 in 100) side effects**

- Nausea and vomiting
- Sore throat
- Dizziness, blurred vision
- Headache
- Itching
- Aches, pain and backache
- Pain during injection of medications
- Short term confusion or memory loss



Remarks

- This is general information only and the list of complications is not exhaustive. Other unforeseen complications may occasionally occur. In special patient groups, the actual risk may be different. For further information please contact your anaesthetist.
- Complications may sometimes occur despite all precautions. However, if they do occur, your anaesthetist will take appropriate steps to manage them.



Are there risks of general anaesthesia?(3)

Uncommon (1 in 1000) side effects and complications

- Aspiration of stomach contents / matter into the lungs
- Depressed breathing
- Failure to intubate
- Dental injury



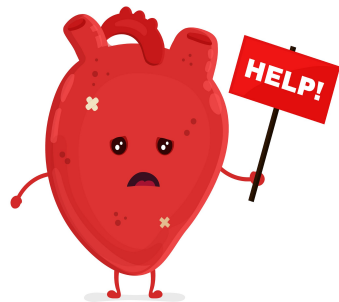
- **Remarks**

- This is general information only and the list of complications is not exhaustive. Other unforeseen complications may occasionally occur. In special patient groups, the actual risk may be different. For further information please contact your anaesthetist.
- Complications may sometimes occur despite all precautions. However, if they do occur, your anaesthetist will take appropriate steps to manage them.



Are there risks of general anaesthesia?(4)

Rare (1 in 10,000) or very rare (1 in 100,000) complications



- Damage to eyes
- Serious allergy to medications
- Nerve damage
- Stroke
- Heart attack
- Complications of invasive line insertion
- Awareness : being awake during the surgery in certain high risk patients
- Death (0.61 per 10 000 anaesthetics in the Hospital Authority between 2003-2005)

- **Remarks**

- This is general information only and the list of complications is not exhaustive. Other unforeseen complications may occasionally occur. In special patient groups, the actual risk may be different. For further information please contact your anaesthetist.
- Complications may sometimes occur despite all precautions. However, if they do occur, your anaesthetist will take appropriate steps to manage them.



**Wish you a
smooth surgery and
swift recovery!**