

## INFORMED CONSENT TO ANAESTHESIA/SEDATION

**Name and surname of patient:**

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**Personal ID No.:**

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Every operation constitutes a major intervention into the human body and is accompanied by certain risks. Anaesthesia (desensitisation) makes the performance of all surgical procedures possible and means the elimination of all perception, both sensory and also the perception of pain.

One part of anaesthesia is called **premedication**. A drug is administered to the patient on the morning of the day when the procedure is to be performed to calm him/her down and eliminate anxiety. This is mostly administered orally (tablets, drops). An injection into the muscle or subcutaneous injection is administered in exceptional cases. After the administration of premedication, the patient should not get up from the bed without being accompanied by a healthcare worker due to the possible risk of him/her falling in the event of a possible loss of coordination of movement.

**General anaesthesia** is chosen by the doctor-anaesthesiologist for those procedures during which relaxation of the muscles is necessary and in cases when the patient must be completely immobile for the performance of the surgical procedure (operations in the abdominal cavity, etc.). General anaesthesia is preferred in care for child patients.

Anaesthesia is mostly induced in children by inhalation of the anaesthetic and intravenous administration in older children. The patient is in a medically induced coma and has no perception of anything going on around him/her and does not feel any pain. General anaesthesia is chosen either separately or, where appropriate, in combination with another type of anaesthesia (epidural anaesthesia – when a local anaesthetic is administered into the roots of the spinal nerves, or peripheral blockade with administration of a local anaesthetic near the nerve plexus or the nerve itself).

An advantage of general anaesthesia is the elimination of mental stress and pain during the surgical procedure, the option of extending the surgical procedure in the event of an unexpected situation or prolonging it.

Despite the fact that a proper preoperative examination is performed, the patient is prepared for the operation and for anaesthesia in the optimal manner and risks arising from any complicated diseases and the patient's overall condition are taken into consideration when choosing anaesthesia, certain complications may arise: pain at the site of entry of the venous cannula, damage to the cornea, injury while securing the airways (lips, tongue, soft palate, vocal chords, windpipe), chipped teeth, inhalation of stomach contents, heart defects, urine retention, sensory disorders from pressure on the nerve structures, postoperative nausea or vomiting, sore throat and muscle pain.

In the event of any unplanned change to the surgical procedure, unplanned invasive procedures may be performed (introduction of invasive venous cannulation). If the need

suddenly arises to support or replace any vital functions, the patient may be put into an unplanned medically induced coma in the intensive care or resuscitation ward.

Once anaesthesia has ended, the effects of the anaesthetics will persist temporarily. The patient will already react when spoken to, but will not remember the immediate postoperative period. He/she will gradually regain full consciousness. Young children may in particular be restless and have trouble communicating during this period.

In the postoperative period, drugs will be administered to the patient to relieve pain, whereas the choice of drugs-analgesics and the method of administration of these analgesics depend on the nature and scope of the surgical procedure. The patient should not suffer any pain in the postoperative period.

The anticipated period of inability to work (anticipated period over which the patient will not be able to perform his/her studies) is 24 hours from general anaesthesia.

It is essential for the legal representative to arrange transport from the hospital/clinic for the person he/she is representing as well as a person to accompany the patient. A suitable person to monitor the patient for a period of 24 hours after general anaesthesia must also be arranged; the unaccompanied use of public transport is strongly discouraged. The child should remain at rest under the supervision of an adult for a period of 24 hours.

In the case of procedures where another type of anaesthesia can be used – specifically **local anaesthesia** (local, conduction anaesthesia, peripheral block), less or no impact on the patient's consciousness is in particular an advantage, as is lasting postoperative analgesia, a lower pharmacological strain and the absence of risks relating to general anaesthesia.

On the contrary, disadvantages are constituted by possible complications and risks arising from the individual types of local anaesthesia, e.g.: pain at the injection site, postoperative headaches, infectious complications, mechanical damage to the nerves, allergic reactions, temporary sensitivity disorders, technical complications (breaking off of the catheter, etc.), urine retention or the occurrence of haemorrhaging.

Another disadvantage is the possibility that this method will fail (insufficient effect of local anaesthetics) with the need to transition to general anaesthesia.

**Analgo-sedation** suppresses your perception of pain throughout the whole body, whereas feelings of pressure or touch, etc. are preserved. Due to the effects of the drugs used, the patient may be half asleep and not remember the procedure. This method of anaesthesia is particularly suitable for diagnostic procedures (endoscopic examination of the digestive tract, etc.) and certain minor surgical procedures.

### **Declarations of the doctor**

I declare that I have explained all of the aforementioned facts to the patient (or his/her legal representative) in a manner which is, in my opinion, comprehensible to him/her. I have also familiarised the patient (his/her legal representative) with the problems which could arise during the period of convalescence and with the consequences of his/her refusing to undergo the proposed procedure.

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Date, name, surname, signature and stamp of the doctor

### **Declarations of the patient (his/her legal representative)**

I declare that I have been comprehensibly informed by the doctor of the facts relating to the medical/diagnostic procedure proposed to me. I had the opportunity to ask the doctor additional questions and if I did so, all of my questions were answered.

On the basis of this instruction, I declare that I agree to the aforementioned medical/diagnostic anaesthesiological procedure (please circle):

a) general anaesthesia

b) local anaesthesia

c) analgosedation

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Date, name, surname and signature of patient (his/her legal representative, relationship to patient).