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Sayfa No:	4/1

#### ANESTHESIA INFORMED CONSENT FORM

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APPLICATION OF GENERAL ANESTHESIA:

#### Dear patient:

During the surgical procedure we will apply general anesthesia in order that you don't feel and remember anything. These applications have been adopted as scientific and ethical practices all over the world. By signing this form, you won't assume all the responsibility, besides the responsibility of anesthetist will not be eliminated. This form is intended to inform you.

Before you are accepted in the operation room, in the preoperative preparation ward, a drug will be given to you by your anesthetist, if deemed necessary. This drug may cause dry mouth, drowsiness and temporary memory loss.

Then you will be sent to the operating room;

- 1 ELECTROCARDIOGRAM electrodes will be pasted into your body to assess the status of your heart,
- 2 A special needle will be entered to your vein for inserting phleboclysis.
- 3 A device will be put on your finger to show the blood oxygenation,
- 4 The blood pressure monitor will be connected to your arm:

Apart from these, some other specific applications may be performed by your anesthetist, if deemed necessary. If these additional applications will be practiced, detailed information will be given in regard.

You will be anaesthetized by the drugs given through needles inserted to your vein or by the oxygen and anesthetic drugs mixture breathed from the mask, if necessary your breathing will be stopped and it will be controlled by means of instruments. **You will not remember these operations**. For the breathing control oxygen and anesthetic drugs will be given through a tube attached to your trachea, if deemed necessary.

After these procedures are completed, starting to surgery will be allowed. During the surgery, your vital functions will be continuously monitored. Drug application and adjustment will be done, if it's necessary. All transactions will be recorded.

After the operation, we will stop to give you drugsö except oxygen and provide other drugs which will eliminate the effects of some. The tube will be removed, if installed any. In order to follow your situation, you will be accommodated in the recovery room and when you wake up completely, you will be sent to your room.

Problems that may emerge during general anesthesia, causes, and the measures:

#### 1-Respiratory Problems:

I-Leakage of stomach contents back to the respiratory tract: This is one of the most important and common problems. To prevent this, if you do not have another problem, (such as duodenum, esophageal stricture) at least 8 hours before the surgery, solid food intake and 6 hours before liquid intake are needed to be cut. In case of the emergency, this period may be shorten. Fasting time for babies and children varies from 2 to 6 hours. Please consult to your doctor.

II. Lack of patency of the airway during anesthesia: Lack of placement of the tube trachea due to your some special characteristics such as big tongue, small jaw, ahead placed trachea.

III-During the insertion of the tube some organs (lips, tongue, teeth, throat, trachea, lung)on the airway may be damaged.

**IV-Severe respiratory failure:** After the operation, sometimes respiratory distress may occur due to pain (pain relief treatment shall be applied to help).

V-Sore throat: it is quite often after surgery, though rarely causes a serious problem.

#### 2 - Circulation Problems:

I-Insertion of the phleboclysis needle accidentally to artery which must be entered in venous, due to very rarely encountered anatomic differences: If any drug is given from artery may risk losing your arm or some of your fingers. In some surgeries, a special needle into the artery is applied to keep track of your blood pressure. Even in this case, though is very rare, above mentioned damages may occur.



Dokuman No:	YÖN.RB.04-01
Yayın Tarihi:	12.01.2012
Rev.No:	00
Rev.Tarihi:	
Sayfa No:	4/2

**II-Heart related problems**: For example severe coronary heart failure, heart block, valvular diseases, previous problems such as heart attack increase the risks of anesthesia and the operation. Besides, during and after surgery in some patients, a heart attack may occur, although it's very rare.

**III- Catheter applications to large veins:** These applications are only considered for patients with severe heart disease, where severe blood loss will likely to occur during surgery and in patients requiring vascular access for a long time after surgery. According to the location to be applied (neck, groin, arm, etc.), bleeding, unwanted effects, such as collection of air in the lungs may occur.

### 3 - Drug-related problems:

I - Like all other drugs, also anaesthesia drugs can lead to some allergic reactions.

#### II- Undesirable effects of drugs

- \* Decrease or increase in blood pressure
- \* Decrease or increase in heart rate
- \* Heart and respiratory arrest

**III-Febrility (Malignant Hyperthermia):** In some patient may develop very rarely "I / IO.OOO" unavoidable fever and this situation is highly fatal, even in places equipped with the best facilities.

#### 4 - Other:

- I- Problems due to technical deficiencies, lack of equipment and personnel
- **II- Position related issues during surgery**: Some problems may occur during operation such as nerve crushing due to lying still in the same position for a long time, crushing in some organs like face and chest because of lying face downwards, as well as eye injuries.

III-Burn injury may occur very rarely on your body as a result of failures of cautery device which is used to burn your bleeding vessels.

The above-mentioned issues are the factors that affect the risk of anaesthesia. Even tough, the rate of death due to the general anaesthesia is difficult to determine, is accepted as 1 / 250 000. Permanent and temporary measures are adopted at maximum in order to avoid expected and unexpected risks that may be encountered during and after anaesthesia procedure.

Please consult to your anesthesiologist the unclear aspects about above mentioned issues and for more detailed information.

#### EPIDURAL ANESTHESIA, SPINAL ANESTHESIA AND PLEXUS BLOCK:

This surgical procedure to be applied can be performed without anesthetizing the whole body, but by anesthetizing partially. If one of these methods is selected, drugs will be injected from your waist, armpit, neck or inguinal, according to the area of the operation.

**Spinal anesthesia:** This is an anesthesia application where pain, sense and movement under the waist are eliminated by injection of local anesthetic with a very thin needle which is going through the fluid in the spinal cord located between vertebrae and surrounding thin membranes in the lumbar region.

**Epidural anesthesia**: This is an anesthesia application, where pain, only under the related region is eliminated by placing a very thin plastic tube and injecting local anesthetic thorough the space known as epidural space located between the membranes surrounding spinal cord between vertebrae in the back or lumbar region and the tissue in that region.

Apart from these, some other specific applications may be performed if deemed necessary by your anesthesiologist; in this case, these applications will be explained to you in detail.

### Problems that may occur during and after regional anesthesia applications:

- **I Decrease of blood pressure and heart rate:** During or after surgery heart rate and blood pressure may decrease. The anesthesiologist will take necessary actions, accordingly.
- **II Headache:** May occur after spinal or epidural anesthesias, if it's the case, consult your anesthesiologist, for the solution.
- **III Neural Complications:** After local anesthesia, temporary or permanent neurological damage may occur, albeit rarely.
- IV-Nausea and vomiting: May occur during or after surgery. Necessary intervention will be done by your



Dokuman No:	YÖN.RB.04-01
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Rev.No:	00
Rev.Tarihi:	
Sayfa No:	4/3

anesthesiologist.

**V-Infection:** As with any injection, also in this intervention, the infection may occur. Necessary measure should be taken to avoid.

**VI-Hearing Disorder**: After spinal anesthesia, a temporary or permanent hearing disorders can rarely occur. **VII-**Some side effects may occur related to drugs used.

**VIII-Failed block:** Depending on spinal or epidural anesthesia application, in case the patient feels pain after the surgery is started or the duration of surgery takes longer than the effect of the drug used for sedation, an additional application (sedation or general anesthesia) may be required which deemed appropriate by the anesthesiologist.

Considering above mentioned risks, please read carefully the detailed explanation related to general anesthesia. In addition, should be noted that, the "Informed Patient Consent" which will be given for anesthesia application includes also the associated applications.

**Neurolept analgesia:** This is a safe and simple application, its induction is slow, allows the reduction in anxiety. The drugs slowdowns movements and gives state of calmness without loss of consciousness, while the reflexes are intact.

### **PERIPHERAL NERVE BLOCK:**

The procedure to anesthetize the nerves and block the movement of arm and leg, in order to perform the surgery in this area without pain, is called "Nerve blockade (peripheral nerve block). The arm and leg can be wholly or partially anesthetized (Hand, foot, finger, etc.) by nerve block.

A required local anesthetic will be injected by a needle from an appropriate area around the nerve where the operation is performed.

All measures adopted in general anesthesia will be applied also in nerve block.

#### Problems that may occur between or after the nerve blocks:

**I-Drug Allergy**: Drug allergy may develop to local anesthetic medications which used for blocking the nerve. **II-Drugs given into vessels**: Due to the adjacency of the nerves to the vessels, the drugs may be given unintentionally to vascular access. Accordingly, dizziness, drowsiness, impaired consciousness, epileptic (epilepsy-like) movements may occur.

**III-Vascular puncture:** Due to the puncture of veins adjacent to nerves, the blood from the vein nerve can accumulate into the tissue in the region.

**IV-Nerve injury:** Due to the damage of the nerve with a needle or given the drug directly into the nerve, late or permanent loss of sensation and movement may occur.

V-In the interventions performed from neck in order to anesthetized the arm; hoarseness, and dilution and falling of palpebrae on the side where the operation was performed, lung deflation, accumulation of water and blood in the lung may occur. In case drugs are given directly to the cerebrospinal fluid or in case of leakage, numbness, loss of motion in the region down from neck heart attack and / or respiratory standstill may occur. VI - Infection: As with any injection, infection may develop also in these initiatives.

**VII-Failed nerve block:** In case the patient feels pain after the surgery is started by applying peripheral nerve block or the duration of surgery takes longer than the effect of the drug used for sedation of the nerve(nerve block), an additional application (sedation or general anesthesia) may be required which the anesthesiologist deems appropriate.

Considering above mentioned risks, please read carefully the detailed explanation related to general anesthesia. In addition, should be noted that, the "Informed Patient Consent" which will be given for anesthesia application includes also connected applications.

Permanent and temporary measures are adopted at maximum in order to avoid expected and unexpected risks that may be encountered during and after anaesthesia procedure.

Please consult to your anesthesiologist the unclear aspects about above mentioned issues and for more detailed information.



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