



# Local Anesthesia with Sedation

Having a surgery can be stressful. We would like to provide you the following information to help you prepare for your surgery.

On the day of surgery, after you finish registration, you will be brought to the preoperative unit.

## In the preoperative area

Your preoperative nurse:

The nurse will make sure you are comfortable and ready for surgery. Your privacy and confidentiality will be respected. Your nurse will perform the required preoperative nursing assessment, including taking your heart rate, blood pressure and temperature. You will be required to change into a hospital gown. The nurse will start an intravenous line (IV). You will be asked to use the restroom before you go to surgery. Please communicate with your nurse if you have any questions. This will help us address any concerns as soon as possible.

Your surgeon:

Your surgeon will see you and answer any remaining questions regarding your surgery. Your surgeon will make a mark on the appropriate surgical site.

Your anesthesia clinician:

Before surgery, your anesthesia clinician will ask health-related questions and perform a pre-operative anesthesia assessment. General anesthesia (an induced loss of consciousness) is most commonly used. Your anesthesia clinician will explain the risks and benefits of anesthesia before you go into surgery. You can also read more about general anesthesia on our clinician homepages.

Your operating room nurse:

Your operating room nurse will ask questions to confirm everything for surgery is in order. The nurse will accompany you to the operating room.

## In the operating room

After you are brought to the operating room, the surgical team (surgeon, operating room nurse, anesthesia clinician and surgical technician) will confirm the surgery to be performed. Vital sign monitors will be placed, as well as oxygen via mask. You will be given sedating medications that will usually make you sleepy and relax. Your surgeon will then inject local anesthetic to make the surgical area(s) numb.

If there is an emergency or if the numbing medication does not adequately work for you, general anesthesia may be used. For general anesthesia, you will be given a combination of medications that will make you lose consciousness. Once you become unconscious, the anesthesia clinician will place a breathing tube through your mouth into your windpipe to deliver oxygen and possibly anesthetic gas. The purpose of this method is to ensure safety.

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During the surgery, the anesthesia clinician is closely monitoring your vital functions and fluid status, providing you appropriate anesthetics to keep you safe and unconscious. In most cases the breathing tube will be removed at the end of the surgery as you awaken. Most individuals have no recollection of this.

## In the recovery room

After your surgery we will take you to the Post-Anesthesia Care Unit (PACU), also known as the recovery room. The recovery room nurse will continuously monitor your vital signs and level of consciousness. You may have an oxygen mask on at this time. It is not unusual for you to have some nausea and grogginess. Sore throat after general anesthesia is also common and may last three to four days. The nurse will closely monitor your pain level and will give pain medication based on your need and your vital signs. It is important for you to tell the nurses and doctors about any pain you are experiencing. We can make adjustments to your pain medications to make you more comfortable.

When we feel it is safe, we will discharge you from the PACU to home or to your hospital room with instructions.