

PATIENT STICKER

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1. ANAESTHESIA INFORMATION

An **Anaesthesiologist** is a specialist medical doctor who has trained for at least 13 years, 5 of which are spent specialising in anaesthesiology, in order to carry out her/his task of monitoring and maintaining your vital signs (e.g. breathing, heart rate, blood pressure, temperature etc.) and keeping you pain free throughout your surgery, as well as to ensure a safe and comfortable recovery as far as possible.

2. PRECEDING YOUR OPERATION

After admission to hospital, prior to surgery, you will be reviewed by your anaesthesiologist. Please take the opportunity to discuss any concerns you may have about the anaesthesia as well as any questions about fees and tariffs. You may receive a mild sedative before surgery to calm and relax you. Kindly note that this consultation might not necessarily take place in the ward, but can also take place in theatre (usually due to unforeseen circumstances). In most cases anaesthesiologists are forced to assess patients on the day of surgery (as most medical funders have blocked admission on the day prior to major surgery).

Please bring with you on the day of surgery:

- Your current medication (if there is any chance you will be staying overnight or you need to take this medication while in hospital)
- A list of any medication that you are currently taking, or have taken in the past three months (including homeopathic and natural products)
- A list of any allergies you may have

You should continue to take all your regular medications up until and including on the day of surgery, unless your surgeon has advised you to discontinue them. If you are taking Warfarin, Aspirin, Plavix or any other blood thinners or any diabetic drugs please ask your surgeon or anaesthesiologist when you should stop these before your operation.

Eating before an anaesthetic or sedation:

YOU NEED TO FAST BEFORE ALL ANAESTHETICS AND SEDATION

All patients, including children, must have no food or milk products from 6 hours before admission, but may have clear fluids (water, black tea or clear apple juice) up to 2 hours before you report to hospital on the day of your surgery

- Morning surgery: No food or milk products after midnight, clear fluids until 5am
- Afternoon surgery: No food or milk products after 6am, clear fluids up to 10am

Non-compliance may result in a life-threatening complication and your operation may therefore be postponed or cancelled for safety reasons.

3. DIFFERENT FORMS OF ANAESTHESIA

There are four types of anaesthesia: Conscious sedation, Local Anaesthesia, Regional Anaesthesia and General Anaesthesia. The choice of anaesthetic used depends on the nature of surgery, your general health status and your own personal preference. Your anaesthesiologist will determine the best type of anaesthesia for your specific case. You are encouraged to ask your anaesthesiologist any questions you may have regarding the type of anaesthetic planned.

Once your surgery has been completed, you will be transferred to the recovery room, where your vital signs will continue to be monitored. There may be a short period of confusion as you regain consciousness. Your anaesthesiologist **may** visit you after your operation to assess your clinical condition and the adequacy of pain control. **Do not drive, operate dangerous equipment or make important decisions for at least 24 hours** after surgery. If you are discharged from the hospital on the day of the operation, please see to it that someone else takes you home.

4. RISKS INVOLVED

Despite preventative measures, advancements in anaesthesia and the best anaesthetic techniques being applied, there are still risks involved in anaesthesia. Contributory risk factors are extremes of age, drug abuse, smoking, obesity, diabetes, heart and lung or any systemic illnesses and muscle disease, especially if poorly controlled. It should also be noted that individuals react differently to all forms of anaesthesia. A non-exhaustive list of complications includes the following:

Common complications 1-10 in 100 cases Minimal treatment usually	Rare complications Less than 1 in 1000 cases May require further intervention	Very Rare complications 1 in 10,000 to 1 in 200,000 cases Often serious with long-term damage	Brain damage or Death Less than 1 in 250,000 cases
<ul style="list-style-type: none"> • Nausea and Vomiting • Sore throat • Shivering or feeling cold • Headache • Dizziness • Itching • Pain during injection of drugs • Swelling or bruising at the drip site • Confusion or memory loss (common if elderly) 	<ul style="list-style-type: none"> • Injuries to teeth, crowns, lips, tongue and mouth • Hoarse voice, voice changes • Vocal cord injuries • Muscle pains • Difficulty in urinating • Difficulty breathing • Visual disturbances • Worsening of pre-existing medical conditions eg Asthma, Diabetes, Heart disease 	<ul style="list-style-type: none"> • Eye injuries • Nerve injuries causing paralysis • Lung infection • Awareness during the operation • Bleeding • Stroke • Allergic reactions • Unexpected reactions to anaesthetic drugs • Inherited reactions to drugs (Malignant hyperthermia, Scoline apnoea, Porphyrria) 	<ul style="list-style-type: none"> • Can be due to worsening of any other complication • Heart attack • Emboli (clots) • Lack of oxygen

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5. ANAESTHESIA ACCOUNT AND CONSENT

Please note that your Anaesthetic Fee is a **separate** account from your hospital and surgeon's account. Depending on your choice of **Medical Aid** and/or **Insurance Plan**, your healthcare funder may not cover the full account. It remains your responsibility to confirm your benefits that apply to your procedure, as well as any exclusion(s).

Hospitalisation is usually fully covered (100%) by health care funders, **but excludes fees charged by medical practitioners**.

To enable us to provide the quality service our patients deserve, fees are based on the cost of delivering a service and are benchmarked to other professional services.

The guarantor, undersigned, patient, responsible person, parent, legal guardian, or surety of the patient, hereby assumes liability as the principal debtor, alternatively as co-debtor jointly and separately with the patient, for the payment of any claims by this practice arising from medication given and/or services rendered to the patient, or to be rendered to the patient, notwithstanding the existence of a medical aid fund or insurance covering such claims. You are advised to consult with your medical aid prior to your anaesthetic regarding the level of cover they will provide.

The anaesthetic fee comprises of three (3) separate chargeable entities: a pre-operative risk assessment, anaesthetic time and a procedure-specific anaesthetic fee. Various factors can affect the cost and cause the final amount to differ from the estimated cost. A non-exhaustive list includes the following: duration of operation, unplanned or after hour procedures, morbid obesity, hypotensive procedures, specialised techniques used to manage your pain, insertion of specialised intravascular lines and care in the Intensive Care Unit (ICU). It should be duly noted that the fees of anaesthesiologists are time-based, and that this practice are allowed to charge fees for every fifteen (15) minutes or part thereof. **It is therefore impossible to confirm an exact amount as the service of this practice is totally dependent on the service delivery of your surgeon.**

This practice charges **Discovery Health Classic rates 204%**

This practice also reserves the right to charge for any additional procedures and/or theatre time spent for any reason whatsoever.

In the event where any of the abovementioned parties commits a breach of contract, this practice is entitled to take immediate legal action and charge arrears interest as determined by the National Credit Act, Act 34 of 2005.

6. PERSONAL INFORMATION

The guarantor, undersigned, patient, responsible person, legal guardian, or surety of the patient, hereby authorises this practice to collect, share and exchange credit information concerning them with any credit bureau or any other person or corporation with whom they may have had or may have financial dealings, as well as, where applicable, other information requested pursuant to, or in any circumstances contemplated in the National Credit Act, Act 34 of 2005. Furthermore, this practice is given the right to disclose personal medical information such as ICD10 diagnostic codes and clinical information pertaining to the patient to its legal representatives or debt collectors provided that such information is treated as confidential and in good faith and only insofar as it is necessary for debt collecting purposes.

7. CONSENT

Obtaining written anaesthetic consent is a legal prerequisite; therefore kindly complete the following sections of the attached GREEN ANAESTHESIA FORM. You MUST give it to the anaesthesiologist on the day of your procedure:

- A. Agreement between the anaesthesiologist and patient and consent to anaesthesia
- B. Name of patient
- C. Medical aid principal member/person responsible for account
- D. Anaesthetic questionnaire

This is an important document as it provides your anaesthesiologist with details of your medical conditions.

I would like to assure you of my commitment to the highest quality healthcare and service and I want to take this opportunity to wish you a speedy recovery.

I confirm that I have read and fully understand the information, and agree to the conditions mentioned above, including the risks of possible complications inherent in anaesthesia, set out herein and confirm that I have been given the opportunity to discuss my concerns and questions with my anaesthesiologist.

PLEASE SIGN HERE

Patient /Guardian

NAME AND SURNAME:	SIGNED:
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Medical Practitioner

NAME AND SURNAME: Dr K Borrill Dr M Hadjimichael	SIGNED:
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