

Informed consent of the patient

## Treatment under general anesthesia

Head anesthesiologist: MUDr. Roman Baláž

Name and surname of the patient: \_\_\_\_\_ Insurance number: \_\_\_\_\_

Place of residence: \_\_\_\_\_

### I. Information about the procedure:

You are about to undergo a surgery in general anesthesia. General anesthesia is a pharmacologically induced coma with loss of consciousness and loss of pain perception. It is used for major, lengthy and painful medical procedures that cannot use local anesthesia. General anesthesia will be applied via a flexible cannula introduced in your peripheral vein, using a combination of anesthetic gases, intravenous anesthetics and potentially also the so-called muscle relaxants, i.e. pharmaceuticals inducing temporary muscle paralysis.

Depending on the nature and duration of the procedure, your respiratory tract will be protected with endotracheal intubation, laryngeal mask or facemask. Throughout the procedure the patient will be connected to a monitor of vital functions. After returning of the basic function the patient is relocated to a recovery room where he is supervised by medical professionals until completely awake. Subsequently, the patient must be transported home - by car and not by public transportation.

### II. Risks of the procedure (general, individual):

No procedure or anesthesia is completely risk-free. The vast majority of complications, such as vomiting after anaesthesia, muscle pain after myorelaxant administration, sore throat or hoarseness after intubation, bother the patient, but resolve quickly. Serious, life-threatening complications during anaesthesia are very rare. Your cooperation with the anaesthesiologist is essential to eliminate them and minimise the risks. It is absolutely essential to observe the time requirement for absolute fasting before the procedure (6 hours without food and 4 hours without drink) and to truthfully inform the doctor about any allergies, general state of health, or medications you are taking.

In case of unexpected serious complications during or after the operation, the doctor may decide to transfer the patient to a higher contracted ENT department of the General University Hospital or the ENT department of the Thomayerova nemocnice in Prague.

### III. Patient's informed consent:

I hereby represent that I have been informed about the planned method of anesthesia in an understandable manner, including information about potential complications. I consider the provided information sufficient and I agree to undergo the procedure in general anesthesia.

Date: \_\_\_\_\_ Patient's signature: \_\_\_\_\_

Anesthesiologist's name and surname: \_\_\_\_\_ Signature \_\_\_\_\_

## **Preoperative examination of adult patients before treatment in general anesthesia**

Submit to your general practitioner.

- CBC (Complete blood count) + Leukocyte Differential Count (white blood cell count differential)
- APTT (Activated partial thromboplastin time)
- LFT (Liver function test)
- Internal preoperative conclusion
- For adults older than 50 years, EKG (Electrocardiography)
- For adults older than 60 years, X-ray of lungs

The tests can't be carried out more than 7 days before the operation. Bring the results of examination with you on the day of surgery.