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## Information for patients undergoing sedation or anaesthesia for oral surgery procedures

### **AN IMPORTANT NOTE ABOUT SEDATION**

Sedation for oral surgery procedures uses anaesthetic drugs in a dose that produces a state of 'detachment' and tranquillity short of full anaesthesia with complete loss of consciousness. With surgical procedures being undertaken inside the mouth it is necessary that the patient is able to cough and swallow and 'protect' their airway from any blood or tissue fragments that could be inhaled into the lungs with potentially serious consequences. Under general anaesthesia a tube is inserted into the larynx and packs placed to prevent this. However, in the conscious or sedated patient this cannot be done and we rely on the patient's own reflexes, which must be preserved. So it is important to understand and accept that a complete loss of consciousness is not the goal with intravenous sedation. That can only be achieved with a general anaesthetic. However the great majority of sedated patients in this situation have little if any recollection of the events in the chair. Those that do report a dreamlike state that is not unpleasant. Local anaesthetic is used in conjunction with anaesthesia or sedation to provide pain relief for all oral surgery procedures.

### **PRE-OPERATIVE ASSESSMENT**

This will usually take place after you arrive at the centre. I will need to know about your general health and previous experiences of anaesthesia and will discuss the options available to you. If you feel that you need to see me before this please ring my rooms on the above number and make an appointment.

### **ANAESTHESIA**

This may be general or local anaesthesia with sedation. For general anaesthesia you are put into a state of controlled unconsciousness for the period of the operation. This is achieved by administering drugs either by injection into a vein or by inhalation. Local anaesthetic refers to the injection of a drug at the site of the operation. An intravenous sedative may be given with local anaesthesia. This will make you sleepy and relaxed, but is not intended to make you unconscious. (See the note above). Thus you might be aware of what is going on around you but will not have any discomfort. Throughout your procedure I will continuously monitor your condition and adjust the anaesthetic accordingly.

### **POSTOPERATIVE CARE**

As you recover from your procedure I will continue to monitor your condition and arrange pain relief, intravenous fluids and other drugs as required.

### **PREPARING FOR SURGERY AND ANAESTHESIA OR SEDATION**

There are some things you can do which make your anaesthetic or intravenous sedation easier and safer.

**Fasting** is necessary to ensure that your stomach is empty. Food or fluid in the stomach may be regurgitated during anaesthesia. If inhaled this could result in serious lung damage. *The same risk applies with local anaesthetic procedures with sedation.* You may have your normal food intake with a light meal up to six hours before surgery. After this you may have small amounts (less than a cupful) of clear fluids (water, clear fruit juice without pulp, black tea or coffee) until two hours before surgery, or until two hours before admission to hospital or day surgery facility for day cases.

**Continue to take all regular medications** up to and including the day of surgery except diuretics (fluid tablets), drugs which cause indigestion if taken without food and insulin or other drugs taken to lower blood sugar. Please bring all your current medications with you to hospital or the day surgery facility. You should also cease any drugs that the surgeon has told you to stop taking (eg aspirin, clopidogrel and warfarin may need to be stopped some time before surgery but only if advised by your surgeon).

**DO NOT SMOKE.** Smoking increases the risk of complications with anaesthesia and surgery. The longer you stop for the greater the benefit.

**Tell me** or the surgeon about any other health problems.

**If you have any questions** please don't hesitate to ask. My job is ensuring your well-being.

## RISKS AND COMPLICATIONS OF ANAESTHESIA AND SEDATION

Australia is one of the safest countries in the world in which to have an anaesthetic, but complications and side effects do happen.

Minor, temporary but more common and *sometimes unavoidable* side effects and complications include nausea and vomiting, drowsiness, headache, sore throat, muscle aches, pain at the surgical site or at the site of injections, where there may be bruising. Damage to teeth may occur during procedures to support your airway while you are unconscious. Restored, capped or prosthetic teeth may be more at risk.

Serious complications are fortunately very rare. These could involve severe allergic reactions, heart attack, stroke, major nerve or blood vessel injury and damage to the lungs, liver or other major organs.

Sensation or "awareness" during surgery under general anaesthesia is possible, but the risk is greatest during emergency procedures like Caesarian section and extremely unlikely during most oral surgery procedures.

Infection resulting from anaesthesia is extremely rare. All drugs, needles, syringes and intravenous lines are used for one patient only and are then discarded. Blood transfusion is nowadays avoided unless an obvious benefit would result as, despite screening, a small risk of cross infection remains.

**These risks should be balanced against the benefits of the proposed procedure and taken into consideration when making a decision to undergo an operation.**

If you have any specific concerns please tell me at the time of the preoperative consultation.

## AFTER YOUR ANAESTHETIC OR SEDATION

If you are having day surgery you must have an adult accompany you home and remain with you until the next day. During this time you should not drive, operate machinery or other potentially dangerous appliances or sign any legal documents, as your judgement may be impaired. It is sensible to rest quietly during this time.

You may eat and drink as you wish unless your surgeon instructs otherwise. It may be best to commence with clear fluids and progress to light foods as tolerated before resuming your normal diet.

Do not drink alcohol for 24 hours.

## FEES

A separate fee will be charged for my services.

The fee is calculated using the Relative Value Guide for anaesthesia, which takes into consideration the degree of difficulty of the anaesthetic, the age and general condition of the patient and the actual time taken. It is charged at a level that reflects the costs of my practice, my training and the cost of maintaining both at the highest possible standards. It is significantly less than the maximum considered fair and reasonable by the Australian Society of Anaesthetists and the Australian Medical Association.

There is a discrepancy between the fees charged and the Medical Benefits Schedule, upon which Medicare and the private health funds base their rebates. This shortfall has increased as the rebates have failed to keep up with escalating costs over the years. For example, since 1991 the MBS rebates have increased 10% while the consumer price index and therefore my costs have risen over 40%.

You should be able to claim a rebate from Medicare for most anaesthetic services. If you have private health insurance you may be able to claim a further rebate from your insurer. There are a variety of "gap" reducing schemes offered by some insurers. However these are based on the same schedule and may have other restrictions, but where applicable may be used to obtain a further rebate. But there may still be significant out of pocket expenses because of the grossly inadequate rebates for anaesthetic services.

Because the fee depends in part on how long your procedure takes it is not always possible to give a definite cost beforehand.

However, for a minor procedure (for example simple extractions) the out of pocket expenses will usually be in the range \$100-\$200, for a procedure of intermediate duration and complexity (such as implants and periodontal procedures) \$200-\$500 and over \$500 -\$1000 for major cases (this would include major jaw surgery), higher if the health fund rebates are not available to you.

If you have any concerns about this or any aspect of your anaesthetic care please do not hesitate to talk to me about them, either by contacting my rooms or when we meet at the time of your procedure.