

Types of Anesthesia

After carefully considering the type of surgery, your medical history and any concerns you may have, your anesthesia clinician will talk to you about the type of anesthesia that is best suited for you. Please keep in mind that in order to keep you safe, there may not be an option for the type of anesthesia you receive.

Main Types of Anesthesia:

General Anesthesia provides a total loss of consciousness, meaning you will be fully asleep. You will not be aware of any pain or feeling during your surgery. This type of anesthesia uses a combination of IV medicine (given through a tube in your vein) and gases (that you breathe through a mask or breathing tube).

Sedation uses IV medication to help you relax and decrease pain. You will not be completely asleep, but you may sleep and will be very groggy.

Regional Anesthesia blocks pain to a specific area of your body. You will not feel pain, but you will also not lose consciousness (you will not be fully asleep) unless other medication is used. Your anesthesia clinician will inject medication near a nerve and you may also get other medications through an IV to help you relax. A peripheral nerve block blocks a nerve or group of nerves and is common for surgeries on hands, feet, arms, legs or the face. Epidural or spinal anesthesia is given through an injection to block pain for a large area of the body such as the abdomen, hips or legs.

Your anesthesia clinician will not leave your side during surgery. They will be right next to you to monitor you and your vital signs and make sure you remain safe and comfortable.

Thank you for allowing us to be a part of your care. You will have time to speak with your anesthesia clinician at the surgical facility on your day of surgery. If you have questions or concerns before the day of your surgery, please do not hesitate to call our office.

National Partners in Healthcare
480-256-1515

What to Expect the Day of Surgery

You will be asked to change into a hospital gown. No personal clothing or personal items will be allowed into the OR.

The pre-operative nurse will review your history, medications and allergies, and take your vital signs. An IV will be placed. If applicable, blood lab work or other tests may be conducted. Women of childbearing age may be screened for pregnancy.

What to Expect After Surgery

After your surgery, you will be taken to the Recovery Room where your vital signs will be monitored. Do not get out of bed alone as you may be weak. Please let the nurses know if you are experiencing pain or nausea so they can work to minimize it with medications and other measures like positioning.

The nurses will call your support person when your procedure is complete.

You will be given discharge instructions and be discharged when your pain is under control and your vital signs are stable.

Additional information

After your surgery, you may receive a text or email asking you to complete a short survey about your anesthesia experience. We value your feedback and use your responses to make sure we continue to provide high quality care to our patients.

Billing: Please note that anesthesia services are billed separately from the rest of your surgery. We do participate with most major insurance plans. Depending on your insurance you may have some out-of-pocket expenses. You can call our Billing Department at 480-820-0627 if you have questions or would like to make pre-payment arrangements.

Quality and Compassionate Anesthesia Care



Preparing for Your Surgery

Procedure Date/Time

Check-in Time

National Partners in Healthcare (NPH) is pleased to be a part of your team, alongside your surgeon and the facility, to ensure a positive experience.

Please be sure to follow any instructions your surgeon has given you in addition to guidelines presented in this brochure. Notify your surgeon right away if there are any changes in your condition, such as cuts or scrapes near the incision/surgical site, fever, cold, sore throat, new cough, stomach flu and/or shortness of breath.

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Medication Instructions

Please talk to your surgeon if you have specific questions about your medications.

14 Days Before Your Procedure

(or immediately if your surgery is in less than 14 days)

STOP TAKING:

- Herbal supplements
- Over-the-counter medications unless you have a prescription
- Pain killers like Aleve, Motrin, Advil, Ibuprofen
- Aspirin unless your healthcare provider has asked you to keep taking it for blood thinning
- Weight Loss Medications like Phentermine, Adipex, Fastin, Lonamin

OK TO CONTINUE TAKING:

- Stomach acid reducers
- Tylenol for pain

24 Hours Before Your Procedure

STOP TAKING:

- ACE inhibitors like Benazepril, Captopril, Lisinopril
- ARBs like Losartan, Olmesartan, Valsartan
- Recreational drugs or alcohol (taking these may cause your surgery to be canceled)

The Day of Your Procedure

STOP TAKING:

- Oral diabetic/hypoglycemic agents
- Fiber or bulking agents
- Diuretics
- Medications that say to take them with milk or food

OK TO TAKE WITH SMALL SIP OF WATER

- Heart rhythm medication (digoxin)
- Inhalers for asthma or emphysema (please bring these to the facility with you)
- Oral medications prescribed to you but not listed above

After Your Surgery is Scheduled

- Try to increase exercise. Even long walks for 20 to 30 minutes at least 3 times a week can be helpful to prepare you for surgery.
- Try to eat healthy foods such as lean proteins and fruits and vegetables.
- Stay well hydrated. Try to drink at least 20 ounces of water three times every day (unless you have a heart condition). Try to decrease the amount of caffeine and alcohol you drink.
- Try to quit smoking or decrease the amount you are smoking. Evidence shows that stopping smoking before and on the day of surgery decreases risks of heart, lung and wound complications. A helpful website for quitting is www.smokefree.gov.

The Day Before Your Surgery

- Do not drink any alcohol. Do not smoke or use chewing tobacco. Do not use other recreational drugs.
- Stop eating solid food at midnight the evening before your surgery.
- You should shower the evening or morning before your procedure with antibacterial soap.
- Your anesthesia clinician may try to call you the night before your surgery. They may call from a number you do not recognize, so please try to answer the phone number you listed as your primary contact number.



The Day of the Surgery

- Stop drinking clear liquids (including Jell-O, tea, clear broth, water, 7-up, Sprite, apple juice, black coffee [without sugar or cream], Gatorade or Pedialyte) 8 hours prior to your surgery. If you received different instructions from your surgeon about drinking before surgery, please follow those.
- Do not shave the operative area. Do not apply lotions, make-up, nail polish, hair spray, perfume, cologne, jewelry, body piercings or false eyelashes.
- You may brush your teeth, but do not swallow any water.
- Please remove contacts and wear glasses.
- Please plan to bring:
 - Proof of insurance, two forms of ID, and a form of payment if you owe a copay
 - Cases for glasses, hearing aids, etc.
 - Copies of your Living Will, Medical Power of Attorney, or other Advanced Directive (if you have one)
 - A list of your home medications; you do not need to bring the actual medication unless otherwise instructed
 - Portable oxygen device, CPAP or BiPAP machine (including mask and tubing), if applicable
 - Pacemaker or internal defibrillator card, if applicable
 - A plan to be driven home by a responsible adult who can stay with you to support you for at least 24 hours after surgery

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