

Patient Name: _____

Your Anesthesia Experience

Anytime you undergo anesthesia, your general health condition must be considered. Depending on your age and your health history, you may need preoperative testing such as blood work and possibly an EKG &/or a "letter of medical clearance" from your primary care doctors. This is done to ensure that your current health does not put you at any additional unnecessary risk while under anesthesia.

You will be required to abstain from food and drinks at least 12 hours prior to your surgery if you are having anything beyond just local anesthesia. This is done for your protection to empty your stomach to prevent aspiration of food or fluid from the stomach into the lungs during anesthesia.

Prior to the day of surgery, your anesthesiologist will have questions for you regarding your health, height, smoking or drug use, weight and past anesthesia experiences. Complete and honest answers are required to assist your anesthesiologist in planning and administering the safest level of anesthetic possible.

As you wake up from your anesthesia, your vitals will still be monitored closely for usually another hour or more. Often you will be given additional medications for discomfort and/or nausea. Once you are awake and aware, you may be released to a responsible adult to go home with, or you have the option to be transferred to a room at the hospital for the night. You may not drive yourself after receiving General Anesthesia or Sedation and you will need a responsible adult with you for at least the first 24 hours after surgery.

Please follow the post-operative instructions on our website at nadericenter.com closely regarding supervision requirements and activity restrictions. Adequate hydration will help in your recovery.

If you have further questions or concerns regarding your anesthesia experience, you may contact the **Anesthesia Department** at INOVA Fair Oaks Hospital at **703-391-3500 option 3** or the Anesthesia Department of the Hospital which you are having surgery.

Patient Initials: _____