

Information on “Surgery under anaesthesia”.

Preparations before the surgery: If you are on regular medications, you should continue these unless advised otherwise, **with the following exceptions.**

- It may be necessary to stop taking ***aspirin, dipyridamole (Persantine) or clopidogrel (Plavix)*** in the days leading up to your operation. Please discuss this with us if you are on any of these tablets.
- Patients on blood-thinning tablets (such as ***warfarin, rivaroxaban or dabigatran***) should inform us as the conditions must be controlled before and after surgery.
- If you are on antidiabetic medications, you should inform us. Special preparation or adjustments of medication may be necessary.
- Any other special medications that you are concerned about.

Admitting hospitals have a pre-operative assessment pathway. You may be asked to attend a clinic where a nurse will review you in preparation for your forthcoming operation. They will be able to advise if you have any queries relating to your medications leading up to your surgery. They will arrange for you to have any necessary tests for your anaesthetic and operation.

How long will I be in the hospital? This depends very much on the exact diagnosis and the operation being performed. This will be discussed at the time of pre-op consultation.

Care of your wound: When you are discharged from the hospital, you can expect to be advised about your wound care by the ward staff. The wound dressing can usually be removed after 48 hours unless told otherwise. You will usually be able to take a bath or

shower 48 hours after your operation. Gently pat your wound dry rather than rub it. Your wound may be slightly raised and pink or red in the days following surgery. This will settle over time as it heals. It is not advisable to rub any ointments or bio-oils onto the wound immediately after surgery.

How soon will I recover? It is normal to feel tired following surgery, and it may take variable time depending on the extent of surgery when you will have your energy levels back.

Before resuming driving: you need to ensure that you can make an emergency stop without hurting your operation site. You should inform your car insurance company that you have had an operation as different insurers may have their own rules about how long you should wait after an operation before you return to driving.

Your return to work: This depends on the type of work you do and your operation. We will advise you during the pre-op consultation.

Potential consequences of surgery. Some of the general risks of surgical procedures are Bleeding after the operation, Scar, Wound infection and Wound swelling. These general and specific risks associated with your surgical procedure will be discussed during the pre-operative consultation.

Risks of general anaesthesia: Modern anaesthesia is very safe, and serious problems are uncommon. It is not unusual after an anaesthetic for some patients to feel sick and some to vomit. Certain people are more prone to this problem, and your anaesthetist will give you medication that decreases the chance of this happening. Other issues that can occur include sore throat, dizziness, blurred vision, headache, itching, aches, pains and backache. These problems tend to get better within a few hours of waking up. Less common problems (1 in 1000 patients) include the development of a chest



infection (particularly in those who already have chest complaints), muscle pains, damage to teeth, lips or tongue, or the worsening of an existing medical condition. Very uncommon problems (1 in 10,000 patients) include damage to the eyes, a severe drug allergy and nerve damage. The risk of awareness (remaining conscious) whilst under a general anaesthetic is very uncommon (also 1:10,000). When awareness does occur, it is typically for a short period before the operation commences. It is extremely rare to be conscious during the operation. The risk to you as an individual will depend on whether you have any other illness, personal factors (such as smoking or being overweight), complicated surgery, takes a long time, or is done in an emergency.

Specific complications associated with your surgery will be discussed with you at the time of pre-operative consultation.

