Buderim Gastroenterology Centre Anaesthetic for Colonoscopy and Endoscopy Patient Information & Consent

PATIENT LABEL

THIS FORM MUST BE READ, UNDERSTOOD, SIGNED AND RETURNED TO BUDERIM GASTROENTEROLOGY CENTRE

It is important to read and understand this Anaesthetic Information Sheet.

This centre believes that tests such as colonoscopy and endoscopy should be provided in a way which is as stress free and as comfortable as possible. The doctors at Buderim Gastroenterology Centre administer a type of anaesthetic called sedation or twilight anaesthesia to ensure that you will feel comfortable during your procedure.

Prior to your procedure

You will have the opportunity to speak to your anaesthetist prior to your test. At this time please feel free to ask any questions you may have about your sedation. Your anaesthetist and the nurses will ask you questions about your past medical history, current medications and allergies. It is important to supply full and accurate information as this will maximize your safety.

If you have many questions or would like to discuss any concerns prior to your procedure date, please ring our centre, or alternatively book an appointment to see an anaesthetist at our anaesthetic clinics which are held regularly at Buderim Gastroenterology Centre.

On the day of your test

You will have been given comprehensive instructions from our staff. It is important to adhere to the fasting times. Fasting means NO FOOD, WATER OR LIQUIDS. The exception is medication. All medication can be taken at the usual time with a small sip of water unless instructed otherwise. All inhalers should also be taken as usual.

What actually happens?

Just before your procedure, a small plastic cannula will be placed in one of the veins in your arms. Your pulse, blood pressure, breathing, oxygen and carbon dioxide levels are monitored during your test. All patients are routinely given oxygen throughout the procedure and in the recovery room. Your anaesthetist will be with you throughout the procedure.

Small doses of short acting sedatives will be administered until you are relaxed and drowsy. You will be kept in this drowsy state until the test is over. It is common to feel like you have been asleep. It is common to have little or no recollection of your test. This type of anaesthetic allows your gastroenterologist or anaesthetist to talk to you and give you instructions during the procedure if necessary.

After the test, you will be taken to recovery where you will be allowed to rest until the drugs wear off sufficiently for you to safely sit up, eat and drink. When the staff and your anaesthetist are satisfied that you are alert and well, you will be escorted to the person who you have arranged to drive you home.

Although the drugs which are used are short-acting, they may affect reflexes, memory and alertness for up to 24 hours. During this time we advise that you do not drive or partake in any activity which requires clear thinking

CF 2.11a: #11, February 2019

Risks of anaesthetic

The drugs which are used during your anaesthetic are short-acting and very safe. They are administered in low doses and hence it is unusual for patients to experience serious side-effects. However, all drugs can have side-effects in some individuals. Listed below are some problems which we feel are important for you to be aware of. (The list does not cover every adverse reaction as this would be impossible)

Common but mild side effects

- bruising at needle site
- local discomfort at injection site
- mild nausea
- mild headache
- dizziness and feeling lightheaded
- foggy memory of the day of the procedure

Less common but manageable side effects

- severe nausea and vomiting
- severe headache
- mild allergy e.g. itch, rash

Uncommon short-term side effects

- allergic reactions/ asthma
- fainting

Very rare but serious side effects

- severe allergy/anaphylaxis/shock
- aspiration of stomach contents into lungs
- stroke or heart attack
- cardiac arrhythmia

(Any serious side effect may lead to death)

NOTE: The above list does not, of course, cover every possible event but it includes most relevant problems. Please ask your Anaesthetist if there is a greater risk of any specific problems for you.

Any questions which have not been answered by reading this information sheet should be directed to your anaesthetist prior to your procedure.

I acknowledge that I have read and understand the above information. All my questions have been answered to my satisfaction.

| (Patients | s Signature) | (Patients Name- printed) | (Date) | |
|---|--|--|---|--|
| (Doctors | : Signature) | (Doctors Name- printed) | (Date) | |
| Patients who lack capacity to provide consent Consent must be obtained from a substitute decision maker/s in the order below. Does the patient have an Advance Health Directive (AHD)? | | on PATIEN | PATIENT LABEL | |
| ☐ Yes | Location of the original or certified copy AHD: Name of Substitute Decision Maker/s: | | | |
| | Signature: Relationship to patient: Date: PH No: | (state the patient's language here, assisted in the provision of any ve given to the patient/parent or guar by the doctor. | rbal and written information | |
| | Source of decision making authority (tick one) Enduring Power of Attorney or AHD Statutory Health Attorney If none of these, the Adult Guardian has provided consent. Ph 1300 QLD OAG (753) | Signature: Date: | Name of Interpreter: Signature: Date: | |