

Demystifying Anesthesia

Cancer treatment is scary. Going to the operating room for surgical treatment is no exception. Fortunately, your physician anesthesiologist will be there to ensure your comfort and safety the entire time.

What is anesthesia?

General anesthesia consists of intravenous and inhaled medications that render you unconscious and unable to feel pain. Neuraxial anesthesia is medicine that is injected into your back to make you numb to surgical pain but does not affect your level of consciousness. Sedation is a broad term encompassing intravenous anesthesia with varying degrees of consciousness. Your physician anesthesiologist will prescribe the safest anesthetic for you based on your surgery and your medical health while also considering your own preferences.

No matter the type of anesthesia given, your anesthesia provider will be with you from before the surgery begins until you are safely recovered. They will continuously monitor your heart rate, blood pressure and oxygen level. They are also responsible for keeping you warm and hydrated, maintaining normal blood sugar as well as other electrolytes, and giving you a blood transfusion if needed.

Who is doing my anesthesia?

In Oregon, this may be a physician anesthesiologist, a nurse anesthetist who is supervised by a physician anesthesiologist, or a nurse anesthetist who is practicing without physician supervision. There is a difference in the training of each. A physician anesthesiologist is a doctor who attended medical school, four years of anesthesia-specific residency and possibly 1-2 years of additional subspecialty training. A nurse anesthetist is a nurse who attended an additional 2-3 years of nurse anesthesia school. On average, a physician anesthesiologist trained over twice as long as a nurse anesthetist and completed nearly 10 times the hours of clinical training.

While the vast majority of anesthetics are administered without a hitch, occasionally there can be unanticipated complications. Physician anesthesiologists, with their 12-14 years of medical training, are best poised not only to respond to emergencies but also to prevent them in the first place. Your surgeon knows, based on where he or she operates, who is likely to be providing your anesthesia care. It's OK to ask if you can be cared for at a facility with a physician anesthesiologist present!

What about pain after surgery?

Physician anesthesiologists are experts in pain management. Based on the surgical location, the expected degree of postoperative pain and your medical history, your physician anesthesiologist will formulate a customized plan for you. A large abdominal incision may best be served by an epidural for a few days, while a smaller procedure may only require opioids taken orally.

How can I make anesthesia safer for myself?

Be honest with your physician anesthesiologist! We don't judge your lifestyle, but we *do* need an accurate medication list, exercise tolerance and drug use history in

order to keep you safe. Certain drugs, both prescription and recreational, interact with medications we give. Your chest discomfort when you climb stairs may be more relevant to us than you think. Anesthesia is a delicate combination of art and science: there is no on/off switch. Your physician anesthesiologist customizes your anesthetic plan to optimize your comfort and safety, and we can only do that if you give us all the information we need.

If you're looking for a reason to quit smoking, an upcoming surgery is a good one! Wound healing and oxygen levels are better in non-smokers, even if you just quit a couple of days prior to your procedure.

What if I still have more questions?

Before your surgery, visit www.asahq.org/whensecondscount for more information about anesthesia. On the day of your surgery, please voice any concerns you may have and ask as many questions as you need. We are here for you, to usher you safely and comfortably through your operation.