

## What to Expect from Anesthesia



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Before, during, and immediately after surgery, your anesthesiologist assumes the role of your medical doctor. To help you gain a better sense of what is involved, we have prepared this overview of the questions our patients ask us most often.

Because everyone's situation is unique, we encourage you to discuss with your anesthesiologist or your surgeon any concerns that are not covered here.

We look forward to taking the very best care of you.

Sincerely,

*David L. Reich, MD*  
*Professor & Chair, Anesthesiology*  
*The Mount Sinai Medical Center*

## Just Think

Before the discovery of anesthesia over 150 years ago, relatively little surgery could be performed. Even a condition like appendicitis, which by current standards is easily treated, was usually fatal in those days.

Since that time, anesthesiology has progressed from simply blocking pain during the procedure itself, to sophisticated control of all bodily functions, to the management and treatment of any medical problems that may arise before, during, or immediately after surgery. Today, anesthesiologists are also the doctors to turn to help minimize post-operative pain and keep you as comfortable as possible.

Modern anesthesiologists are an invaluable resource to their patients, offering a wide range of expertise about medications and how the human body works.

## What is the best type of anesthesia for my type of procedure?

There are three main categories of anesthesia: general, regional, and local. Each has many forms and uses, as well as different risks and benefits. In all three types, your condition is carefully monitored, controlled, and treated by your anesthesiologist, who uses sophisticated equipment to track the ways your body is responding.

There is no difference in overall safety between one type of anesthesia and another.

- In *general anesthesia*, you are unconscious and have no awareness or other sensations during this period. The duration and level of anesthesia are calculated and constantly adjusted with great precision. A breathing tube may be inserted through your mouth to maintain proper breathing. At the conclusion of surgery, your anesthesiologist will reverse the process, and you will regain awareness in the recovery room.
- In *regional anesthesia*, your anesthesiologist makes an injection near a cluster of nerves to numb the area of your body that requires surgery. You may remain awake, or you may be given a sedative. You do not see or feel the actual surgery take place. There are several kinds of regional anesthesia. Two of the most frequently used are spinal anesthesia and epidural anesthesia, both of which are produced by injections in extremely precise areas of the back. They are frequently preferred for childbirth and orthopedic surgery.
- In *local anesthesia*, the anesthetic is usually injected into the tissue to numb only the specific location of your body where the procedure will take place. This is the case, for example, for minor surgery on the hand or foot.

Since some operations can be performed using different anesthetic procedures, you may be able to request one type of anesthesia over another, depending on your medical and surgical circumstances. Your anesthesiologist, after reviewing your individual situation, will discuss available options with you and your surgeon.

### Who will my anesthesiologist be?

Because operating room schedules often have to accommodate emergency procedures and are therefore subject to change, it is unlikely that you will meet the anesthesiologist who will care for you until the day of your surgery. If you have special concerns ahead of time, you may speak with your surgeon and/or contact us at 212-241-7475, and a member of the Department of Anesthesiology will call you back.

If you have your pre-operative tests done at Mount Sinai, you will have the opportunity to meet a member of the Department of Anesthesiology, who will discuss your medical history with you, perform a physical exam, and tell you exactly what to expect. You will also have the opportunity to ask any questions you may have.

### I've heard that there are risks involved in having anesthesia. How serious are they?

All operations and all types of anesthesia entail some risks, which depend on many factors, including the type of surgery and medical condition. Your anesthesiologist takes multiple precautions to prevent complications, and fortunately, adverse events are very rare. You should speak to your anesthesiologist if there are any issues that you are particularly concerned about.

### What should I do to prepare for anesthesia?

In some cases, you will be asked to undergo a number of pre-operative tests that may include blood tests, x-rays, and electrocardiograms. These will take place several days in advance of surgery and can be done at the Mount Sinai Pre-Admission Testing facility if your surgeon's office schedules this.

For most procedures, you must have an empty stomach to minimize the chances of regurgitating any undigested food or liquids. Some anesthetics suspend the normal reflexes that prevent food and drinks from entering your lungs, so for your safety, you may be told to fast (take no food or liquids) before surgery. Your surgeon will tell you specifically whether you may or may not eat and drink ahead of time, and for how long.

In addition, the anesthesiologist may instruct you to take certain medications with a little water during your fasting time. ***For your own safety, it is very important that you follow these instructions carefully; if not, it may be necessary to postpone surgery.***

Cigarettes and alcohol affect your body just as strongly as, and sometimes more than, any of the medically prescribed drugs you may be taking. Because of their effects on your lungs, heart, liver, and blood, to name a few, cigarettes and/or alcohol can change the way an anesthetic will work during surgery. So it is crucial to let your anesthesiologist know about your consumption of these substances, and also to mention any over-the-counter medications or herbal/holistic medicines you have been taking. This is equally important for so-called street drugs, such as marijuana, cocaine, amphetamines, and the like.

#### Contact Numbers

Main Switchboard – 212-241-6500

Non-Emergency Medical Questions (*Ask to speak with the anesthesia clinical coordinator*) – 212-241-7475

Financial/Billing Questions – 412-937-5760

or Toll-free – 800-627-4470

For more information, visit [www.mountsinai.org](http://www.mountsinai.org).

People are sometimes reluctant to discuss these things, but it is worth remembering that such discussions are entirely confidential, and that various privacy laws protect whatever your doctor writes about them in the medical record. Your anesthesiologist's only interest in these subjects is in learning enough about your physical condition to provide you with the safest anesthesia possible. So, in this case, honesty is definitely the best policy, and the safest one.

*Please feel free to direct any questions or express any of your concerns to your anesthesiologist ahead of time. We want to make your surgical and anesthetic experience as safe and pleasant as possible.*

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### Financial Considerations

Your anesthesiologist is a physician specialist like your surgeon or internist, and you will likely receive a bill for professional anesthesiology services. Your hospital bill may also include separate charges for medications and equipment used by your anesthesiologist. You or your surgeon may also request pain management services from an anesthesiologist pain management specialist, or you may receive care by an anesthesiologist for critical care or for a consultation. Any of the services provided by an anesthesiologist may result in a separate bill.

### Participation with Insurance

Although anesthesiologists at Mount Sinai participate with many managed care organizations, they do not participate with all carriers. We encourage you to be aware of the specifics of your own policy and to contact us at 412-937-5760 or 800-627-4470 if you have questions. Some plans may require that you pay a deductible and/or co-payment.

### For Self-Pay, Out-of-Network, and Non-Covered Services

If you do not have insurance or are covered by a carrier we do not participate with, you are responsible for 100% of our charges unless you qualify for hardship (see below). Any care not covered by your existing insurance coverage, such as cosmetic surgery, will require payment in full.

If you would like an estimate of anesthesiology charges, please contact us at 412-937-5760 or 800-627-4470. We will need to know the name of your surgeon and the type of operation planned. If you contact us several days (preferably 7-10 days) in advance of surgery, we may be able to determine to what extent your plan will cover your anesthesiology charges and what your out-of-pocket expenses will be, if any. In certain circumstances, we may be able to make special arrangements to reduce out-of-pocket expenses with out-of-network insurance carriers, but only when we work on this in advance of surgery.

### Filing of Insurance Claims

If complete information has been provided to us, we will submit claims directly to both primary and secondary insurance carriers as a courtesy to you. Otherwise, doing so will be your responsibility.

### Patients with Financial Hardship

Mount Sinai has a policy to assist patients who face undue financial hardship. To qualify for discounts, you must supply the requested documentation regarding your financial situation.

*Portions of the above are based on "Anesthesia and You" (©1994) by the American Society of Anesthesiologists. A copy of the full text may be obtained from: ASA, 520 N. Northwest Highway, Park Ridge, IL 60068-2573. ([www.asahq.org](http://www.asahq.org))*