

FORMULARZ ŚWIADOWEJ ZGODY PACJENTKI / KWALIFIKACJI LEKARZA DO ZNIECZULENIA PATIENT'S INFORMED CONSENT FORM / DOCTOR'S QUALIFICATION FOR ANAESTHESIA

Imię i nazwisko <i>First name and surname</i>	PESEL <i>PESEL</i>	Nr Księgi Głównej <i>General Register No.:</i>
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Dear Madam, the planned surgery is to be carried out under anaesthesia. The following types of anaesthesia are used in our Hospital:

1. **general anaesthesia**
2. **general anaesthesia + regional anaesthesia**
3. **nerve block anaesthesia:**
 - a) **spinal anaesthesia**
 - b) **epidural anaesthesia**

This questionnaire should help you prepare for a conversation with a specialist in anaesthesiology and intensive care. If, in your case, it is possible to consider a form of anaesthesia other than the anaesthesia proposed by your physician, you will be informed thoroughly about it.

WHAT IS GENERAL ANAESTHESIA?

General anaesthesia means the fully controlled and reversible elimination of consciousness and pain. The patient is in a state that can be compared to a very deep sleep. A large group of drugs administered intravenously by anaesthesiologists and in inhaled form together with breathing oxygen is responsible for sleep and not feeling pain during the operation.

In most general anaesthesia, the patient's breath is replaced by a device called a ventilator or is personally controlled by an anaesthesiologist using a special breathing bag. Anaesthesiologists often combine general anaesthesia techniques with local anaesthesia. The combination of general and local anaesthesia allows the doses of anaesthetics to be reduced, shortens the awakening period and prolongs the period of not feeling pain immediately after surgery. If this procedure can be used in your case, you will be informed about it.

WHAT IS SPINAL ANAESTHESIA?

Spinal anaesthesia consists in inserting a thin needle into the dural sac, located in the spine canal, which contains cerebrospinal fluid, and administering to this space a drug from a group of local anaesthetics (similar as at the dentist's), often with the addition of supportive drugs (adjuvants), and then removal of the needle. The puncture is performed in the lumbar spine. As a result of the drug action for 2-3 hours (sometimes longer) in the anaesthetized area, the patient does not have the feeling, pain and sometimes also the ability to move. The patient's condition is monitored at all times and remains under constant supervision of the anaesthetic team. During this type of anaesthesia the patient is conscious.

WHAT IS EPIDURAL ANAESTHESIA?

Anaesthesia is the insertion of a soft catheter through the needle into the epidural space of the lumbar spine. Local anaesthetics are administered through the catheter. The secured catheter remains in place, at least until the end of the procedure or until the decision of the anaesthesiologist. Just like with spinal anaesthesia, the patient is conscious during the procedure.

SAFETY AND RISK OF ANAESTHESIA

Many factors influence the risks associated with anaesthesia. These include age, body weight, pregnancy, smoking, alcohol consumption, consumption of certain medicines, heart, kidney, liver, pancreas diseases and many others. For this reason, it is necessary for your health to be assessed by an anaesthesiologist.

HAZARDS AND SIDE EFFECTS OF REGIONAL ANAESTHESIA*

Possible problem	Frequency of occurrence
Skin itch	Common - about 1 in 3-10 patients, depending on the type and dose of the drug used
Significant drop in blood pressure	Spinal anaesthesia: common - about 1 in 5 patients Epidural anaesthesia: sporadic - about 1 in 50 patients
The epidural anaesthesia administered during childbirth does not work effectively enough to be supplemented with an additional dose, so another type of anaesthesia for Caesarean section is necessary	Common - about 1 in -10 patients
Anaesthesia does not work effectively enough and it is necessary to administer additional drugs to relieve pain during surgery	Spinal anaesthesia: sporadic - about 1 in 20 patients Epidural anaesthesia: common - about 1 in 7 patients
Spinal anaesthesia is not effective enough for Caesarean section and general anaesthesia is necessary	Spinal anaesthesia: sporadic - about 1 in 50 patients Epidural anaesthesia: sporadic - about 1 in 20 patients
Post-lumbar puncture headaches	Epidural anaesthesia: rare - approx. 1 in 100 patients Spinal anaesthesia: rare - approx. 1 in 500 patients
Damage to the nerve (e.g. resulting in loss of sensation in the leg area or paresis of the leg)	Effects lasting less than 6 months: quite rare - about 1 in 1-2,000 patients Effects lasting for more than 6 months: rare - about 1 in 24,000 patients
Meningitis	Very rare - about 1 per 100 thousand patients
Haematoma (blood clot) in the spine at the site of administration of spinal or epidural anaesthesia	Very rare - about 1 per 168 thousand patients
An abscess or haematoma causing severe injury including paralysis (lower limb paralysis)	Very rare - about 1 per 100 thousand patients
In case of epidural anaesthesia:	

Accidental injection into a vein in the spinal region of a very large amount of a local anaesthetic	Very rare - about 1 per 100 thousand patients
Accidental injection of a large amount of local anaesthetic into the cerebro-spinal fluid, which can cause breathing problems and, in very rare cases, loss of consciousness	Quite rare - about 1 per 2 thousand patients

HAZARDS AND SIDE EFFECTS OF GENERAL ANAESTHESIA*

Possible problem	Frequency of occurrence
Chills	Common - about 1 in 3 patients
Throat pain	Common - about 1 in 2 patients
Nausea	Common - about 1 in 10 patients
Muscle pains	Common - about 1 in 3 patients
Cracks or bruising of the lips or tongue	Sporadic - about 1 in 20 patients
Tooth damage	Quite rare - about 1 per 4.5 thousand patients
Inability of the anaesthesiologist to insert a breathing tube during administering anaesthesia	Rare - about 1 in 250 patients
Lower respiratory tract infections	Common - about 1 in 100 patients - but in most cases infections are not serious
Awareness (awareness of a part of the procedure during anaesthesia)	Quite rare - approx. 1 in 1,000 patients Rare - approx. 1 in 670 patients
Strong allergic reaction	Rare - about 1 per 10 thousand patients
Death or damage to the brain	Death: very rare - less than 1 in 100,000 cases Brain damage: very rare - exact data are not known

PROCEDURES ACCOMPANYING ANAESTHESIA

Additional procedures accompanying the anaesthesia are performed by an anaesthesiologist in order to increase the patient's safety during surgery and anaesthesia. This approach is dictated by the need to broaden the techniques for monitoring cardiovascular, respiratory and nervous system functions in patients with a predefined high surgical risk, as well as in patients who are expected to undergo long-term and severe surgery or who have unforeseen life-threatening complications during the operation. These may include:

- catheterization of large venous and arterial vessels,
- transfusion of blood or blood products,
- insertion of the catheter into the epidural space,
- insertion of a special probe to stop gastrointestinal bleeding,
- insertion of a bladder catheter,
- prolonged respiratory support.

Imię i nazwisko	PESEL
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ISTOTNE JEST SKRUPULATNE WYPEŁNIENIE ANKIETY, PONIEWAŻ NA JEJ PODSTAWIE LEKARZ MOŻE DOBRAĆ ODPOWIEDNI RODZAJ ZNIECZULENIA
IT IS IMPORTANT TO FILL IN THE QUESTIONNAIRE METICULOUSLY, BECAUSE ON ITS BASIS THE PHYSICIAN MAY CHOOSE AN APPROPRIATE TYPE OF ANAESTHESIA

CZY CHOROWAŁ/ŁA PAN/PANI, BĄDŹ CHORUJE NA JEDNĄ Z WYMIENIONYCH PONIŻEJ CHOROÓB: <i>HAVE YOU SUFFERED OR ARE YOU SUFFERING FROM ANY OF THE DISEASES LISTED BELOW:</i>	TAK / YES	NIE / NO
Choroby serca: przebyty zawał mięśnia sercowego, choroba wieńcowa <i>Heart diseases: myocardial infarction, coronary heart disease</i>		
Zaburzenia rytmu serca, wady serca, zapalenie mięśnia sercowego / <i>Heart rhythm disorders, heart defects, myocarditis</i>		
Choroby układu krążenia: nadciśnienie tętnicze, niskie ciśnienie krwi / <i>Cardiovascular diseases: hypertension, low blood pressure</i>		
Choroby naczyń: żylaki, niedokrwienie kończyn, bóle w podudziach <i>Vascular diseases: varicose veins, ischaemia of limbs, pains in the lower extremities</i>		
Choroby dróg oddechowych/płuc: gruźlica, pylica, rozedma, zapalenie płuc, astma oskrzelowa, POChP <i>Respiratory tract/pulmonary diseases: tuberculosis, pneumoconiosis, emphysema, pneumonia, bronchial asthma, COPD</i>		
Choroby przewodu pokarmowego: choroba wrzodowa żołądka / <i>Gastrointestinal diseases: gastric ulcer disease</i>		
Choroby wątroby: żółtaczkę, kamica pęcherzykowa, marskość / <i>Liver diseases: jaundice, gallbladder stones, cirrhosis</i>		
Choroby układu moczowego: kamica, zapalenie pęcherza moczowego / <i>Diseases of the urinary tract: stone disease, cystitis</i>		
Cukrzyca, dna moczanowa, kolagenozy / <i>Diabetes, gout, connective tissue diseases</i>		
Choroby tarczycy / <i>Thyroid diseases</i>		
Choroby układu nerwowego: padaczka, porażenia, niedowłady / <i>Nervous system diseases: epilepsy, paralysis, paresis</i>		
Choroby układu kostno-stawowego: bóle kręgosłupa, dyskopatia <i>Diseases of the osteoarticular system: spinal pains, spinal disc herniation</i>		
Niedokrwistość, skłonność do krwawień samoistnych, do wylewów / <i>Anaemia, susceptibility to spontaneous bleeding, haemorrhages</i>		
Zmiany nastroju: depresja, nerwice / <i>Mood changes: depression, neuroses</i>		
Uczulenia (alergia): katar sienny, wysypki uczuleniowe, uczulenia na leki oraz pokarmy, środki chemiczne, plaster, jodynę itd. <i>Sensitisation (allergy): hay fever, allergy rash, allergy to medicines and food, chemicals, plaster, iodine, etc.</i>		
• jeśli „TAK”- prosimy wymienić substancje: / <i>If “YES”, please list the substances:</i>		
• jeśli „TAK” – prosimy podać objawy uczulenia: / <i>If “YES”, please specify allergy symptoms:</i>		
Inne schorzenia/choroby przewlekłe: / <i>Other chronic conditions/diseases:</i>		
Czy był/była Pan/Pani wcześniej operowana? / <i>Have you been previously operated on?</i>		
Czy miał/miała Pan/Pani transfuzje krwi? / <i>Have you had blood transfusions?</i>		
• jeśli „TAK” prosimy podać z jakiego powodu? / <i>If “YES”, please state why?</i>		
Czy były powikłania w czasie transfuzji krwi? / <i>Were there any complications at the time of blood transfusion?</i>		
Czy aktualnie są zażywane leki? / <i>Are any drugs currently being taken?</i>		
• Jeśli „TAK” to jakie? / <i>If “YES”, what are they?</i>		
Czy pali Pan/Pani tytoń? Jeśli „TAK”: / <i>Do you smoke? If “YES”: /daily</i>		
Czy pije Pan/Pani alkohol: <input type="checkbox"/> nie <input type="checkbox"/> rzadko <input type="checkbox"/> niewiele <input type="checkbox"/> regularnie <i>Do you drink alcohol: <input type="checkbox"/> no <input type="checkbox"/> rarely <input type="checkbox"/> small amounts <input type="checkbox"/> regularly</i>		
Czy zażywa Pan/Pani środki uspokajające, nasenne, narkotyczne? / <i>Do you take sedatives, sleeping pills, drugs?</i>		
• Jeśli „TAK” to jakie, jak często? / <i>If “YES”, what are they, how often?</i>		