

## Dr Laurence Poon

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Hello, I am Dr Laurie Poon, your anaesthetist and I look forward to meeting you & your child when you have your operation with Mr Leo Donnan.

An anaesthetist is a specialist doctor who cares for you while you are having your procedure. You or your child's care, comfort and safety are the sole concerns of your anaesthetist whilst you are having your procedure performed. An anaesthetist is a Specialist doctor trained in anaesthesia, pain control, patient resuscitation, management of medical emergencies and safety. Qualified Australian anaesthetists are highly trained and study for 7 or more years after obtaining their medical degree to acquire the skills and knowledge necessary to ensure that your procedure is as safe as possible.

I trained at the University of Melbourne and obtained my Anaesthetic Fellowship at the Australian and New Zealand College of Anaesthetists in 1999. I have also obtained two postgraduate qualifications in Perioperative Ultrasound as well as working as a Retrieval Physician and Ambulance Officer for the Victorian Government. Previously I was a Cardiothoracic Anaesthetist at the Royal Melbourne Hospital and have particular interests in Difficult Airway Management, Regional Blocks/Anaesthesia, Ultrasound and Trauma. These are areas that I regularly teach to postgraduate doctors, and conduct research.

I would like to provide you with some information to help explain your anaesthetic. I will see you or your child prior to surgery to help answer any further questions you may have. I will discuss with you any medical illnesses present, allergies/reactions to medications, past anaesthetic experiences and any medication you may be taking. Together we will determine an anaesthetic plan. This may be a regional anaesthetic (a spinal block, epidural or arm block), a general anaesthetic, sedation, local anesthetic or combination of these.

**General Anaesthesia** ("Sleep" or "Full anaesthetic") is a state of unconsciousness induced by injecting medication into your veins and/or breathing a mixture of gases.

**Regional Anaesthesia** is when an injection "nerve block" numbs the part of the body where you are having your operation. This is often combined with Sedation.

**Sedation** is when medication is given to make you relaxed and drowsy.

**Local Anaesthetic** is the administration of medication to numb the area.

As your Anaesthetist, I will be present during your operation to make sure all is well and to ensure that your recovery is as smooth, comfortable and complication-free as possible. You or your child wake up in the recovery area where you may feel drowsy, feel sick or have a sore throat. These side effects are temporary and pass quickly.

### **Before your Surgery**

Important things to remember before your surgery include:

Fasting- an empty stomach minimises the risk of inhaling your stomach contents.

Stopping smoking- ideally 6 weeks prior but stopping is better than not stopping at all.

### **Medications:**

Blood pressure tablets should be taken with a sip of water.

Blood thinners: Plavix/ Iscover/ Clopidogrel/ Warfarin should be stopped at least 1 week prior.

Diabetic oral medications – stop but check with your surgeon regarding Insulin (usually 1/3 dose).

Please check with Mr Donnan regarding your medication instructions.

If Mr Donnan's operation requires a general anaesthetic you may choose to go to sleep by breathing on a mask avoiding a needle or by injection via the drip.

An endotracheal tube is inserted into the trachea/windpipe or a Laryngeal Mask Airway is placed in the throat once you are asleep.

Some of Leo's operations may be suitable for a spinal anaesthetic. After a small sting of local anaesthetic (most people have no memory of this), I gently insert a fine needle into your back/spine to inject local anaesthetic and a narcotic into the spinal fluid which surrounds your spinal cord. In about 10 minutes you feel warm and your legs become numb. This enables Leo to operate with you in complete comfort. Throughout your operation, I administer sedation into your veins to make you comfortable and lightly sleeping.

**The spinal block has the following advantages:**

No pain when you wake up at the end of your operation because of the block.

Less nausea.

Minimal risk of teeth damage: no tube in the mouth required for a general anaesthetic.

Faster recovery of mental function since sedation is not as deep as a GA.

Spinal anaesthesia is safe and is often used for Caesarian Sections (delivering babies via the mother's abdomen) and elderly people with broken hips (neck of Femur).

If required, I insert a special drip/ "arterial line" into your artery/"pulse" to accurately monitor your blood pressure necessary during major joint replacement surgery.

**Pain relief after your surgery may include:**

Nerve blocks (femoral block numbs the knee) or sciatic blocks numbing the ankle usually placed under Ultrasound guidance lasting 12-15 hours (up to 24 hours).

PCA (Patient Controlled Analgesia) push button which you self-administer a opiate such as morphine or fentanyl with a safety "lockout" to prevent overdosage and respiratory depression.

For younger children, a morphine infusion runs into the veins and is looked after by the nurses.

Local anaesthetic wound infiltration.

Caudal epidural injection at the base of the spine to give a "numb bum".

Spinal morphine lasting 12-18 hours with risks of nausea, itch in 10-20%.

Epidural catheter- a thin tube placed into your back infusing local anaesthetic onto your spinal cord to continue your pain relief for 24-48 hours.

**Risks Of Anaesthesia**

All anesthetics have risks. Many are quite minor and pass quickly ranging from bruising from drips, sore throats from the breathing tube, feeling sick/nausea and drowsiness. Other complications include temporary nerve damage from blocks or positioning on the table, dental damage especially fragile teeth/crowns/caps from the breathing tube, muscle aches and temporary difficulty breathing or talking. Rare but serious complications include heart attacks, strokes, death 1:43000, awareness or "waking up" 1:10000, aspiration of stomach contents 1:5000, numbness to the legs/paraplegia from spinal blocks 1:50000, life-threatening allergic/anaphylactic reactions 1:15000.

These risks while real, are weighed against the benefits of the procedure. There is no safer place in the world than Australia to have an anaesthetic.

**Cost of Anaesthesia**

Medicare and most Health Fund rebates do not cover the entire cost of anaesthetic care. Usually there is an **out of pocket expense** which you will be expected to pay. My fee is determined by the degree of difficulty and duration of your anaesthetic care. It is calculated using the Relative Value Guide, as recommended by the Australian Medical Association and the Australian Society of Anaesthetists. Unfortunately, the out of pocket expenses cannot be accurately determined prior to surgery since there are many factors which need to be taken into account. There are over 40 different health funds, each with their own rebates for members. Your out of pocket expenses are dependent upon your health fund. Should you wish to obtain an estimate of your out of pocket expenses, please do not hesitate to contact my rooms on 9487 4820.

I hope that this has answered some of your questions about your upcoming anaesthetic. I look forward to meeting you.

Dr Laurie Poon