

Introduction

- Monitored Anaesthetic Care (MAC) is provided by anaesthetist for a procedure performed under local anaesthesia or sedation. It may be requested by a surgeon, dentist, obstetrician, physician, endoscopist, radiologist, radiotherapist, or other proceduralists.
- MAC shall include:
 - Pre-anaesthetic assessment with adequate explanation of the procedures and risks by the responsible anaesthetist.
 - Adequate instructions for peri-operative preparation (e.g. patient must adequately fast the same time as preparing for general anaesthesia).
 - Adequate monitoring of the patient during the procedure.
 - Administration of intravenous sedation if required.
 - Other therapeutic measures as required.
 - Transfer of patient, if required, to an appropriate Recovery Area.
 - Sedations will often be given to patients during MAC. (Sedation is the depression of the central nervous system and/or reflexes by the administration of drugs by any route to decrease patients' discomfort without producing unintended loss of consciousness.)
- Your anaesthesia will be provided by your anaesthetist. Anaesthetists are medical doctors who are trained and specialized in providing anaesthesia. During anaesthesia, you are carefully monitored, controlled and treated by your anaesthetist, who uses sophisticated equipment to track all your major bodily functions. The duration and level of anaesthesia is calculated and constantly adjusted as needed, to ensure a smooth and uneventful surgery. Your anaesthetist will stay with you all the time during your anaesthesia and ensure your safety during operation.

Possible Risks and Complications

- The risks are different for every individual patient, depending on multiple factors such as the type of surgery and pre-existing medical conditions. Your anaesthetist normally discusses with you the special risks which are relevant to your condition or the operation you are having. Normally he/she informs you of the most common risks in your particular situation, and also the most dangerous ones although these may be rare. It may be impossible for them to explain or foresee every possible risk for each patient.

Procedure Information Sheet - Monitored Anaesthetic Care (MAC)

- Some of the more common potential complications are:
- Protective reflexes may be obtunded (e.g. Gag Reflex), Aspiration / Aspiration Pneumonia is a serious consequence if the patient has not adequately fasted.
 - Respiratory drive may be depressed by the sedatives and so as the muscles involved in respiration resulting in Airway Obstruction, Hypoventilation and Hypoxia.
 - The variety of drugs given for sedation will have adverse effects on the Cardiovascular system (e.g. unstable blood pressure and heart rate) which may cause serious complications such as Myocardial Infarction and Cerebrovascular Accident.
 - The sedation may outlast the proposed procedure which the patient may be drowsy and sleepy even after the surgical procedures.

Remark

The above mentioned procedural information is not exhaustive, other unforeseen complication may occur in special patient groups or different individual. Please contact your physician for further enquiry.

Reference: http://hkca.edu.hk/ANS/standard_publications/guidep02.pdf

Frequently Asked Questions

1. How long should be the fasting time if I am going to have surgical procedure under MAC?

- The fasting time should be the same as preparing for having General Anaesthesia. Generally, no food or drink should be taken 6 - 8 hours before the procedure.

2. What are the discharge criteria for discharging patients under same day admission or day surgery ward?

- Generally,
 - The patient should have stable vital signs e.g. Blood Pressure, Heart Rate, Oxygen Saturation.
 - The patient should be fully awake and oriented.
 - The patient should be able to eat and drink with no nausea and vomiting.
 - The patient should be fully ambulant.
 - Pain and nausea should be well controlled.
 - The patient should be able to pass urine after the procedure (especially for urological surgery).

3. What are the precautionary measures to take when I am about to go home the same day after the surgical procedure?

- The patient should have a responsible adult to escort him/her home.
- The patient should be warned not to drive or operate machinery or sign legal documents for at least 24 hours.
- Written information including possible complications and how to obtain medical advice, if and when required, should be given on discharge.

I acknowledge that the above information concerning my operation/procedure has been explained to me by Dr. _____. I have also been given the opportunity to ask questions and receive adequate explanations concerning my condition and the doctor's treatment plan.

Name:

Pt No.: Case No.:

Sex/Age: Unit Bed No:

Case Reg Date & Time:

Attn Dr:

Patient / Relative Signature: _____

Patient / Relative Name: _____

Relationship (if any): _____

Date: _____