

ANAESTHESIA QUESTIONNAIRE

Name, Surname Title Personal ID No.

1. ☐ YES ☐ NO I have allergies.

If YES, to what substances or medications

and my allergy manifests itself in the following way:

2. ☐ YES ☐ NO I am receiving ongoing treatment for chronic or acute heart, lung, liver, kidney, central nervous system, diabetes or other diseases

If YES, please specify:

3. ☐ YES ☐ NO I am under long-term medication.

If YES, specify medication

4. ☐ YES ☐ NO I suffer drug or alcohol addiction.

If YES, please specify

5. ☐ YES ☐ NO I am a smoker. I smoke ___ cigarettes a day

6. ☐ YES ☐ NO I have frequent headaches.

Their probable cause is

I treat the with:

7. ☐ YES ☐ NO I suffer back pain.

The probable cause is

8. ☐ YES ☐ NO I bruise easily.

☐ YES ☐ NO I bleed from small wounds for an unusually long time

I have the following bleeding disorder:

9. ☐ YES ☐ NO I have had general anaesthesia in the past.

☐ YES ☐ NO I have had epidural anaesthesia in the past.

In the course of this procedure, the following complications occurred:

I have understood all the questions on this questionnaire and I declare that I have answered the questions truthfully to the best of my knowledge and conscience.

Date Signature

CHILDBIRTH FROM THE ANAESTHETIST'S PERSPECTIVE – INFORMATION FOR PARTURIENTS

In the normal course of childbirth, the parturient often does not meet an anaesthetist at all. The exception is if she desires epidural analgesia to relieve labour pain or if spontaneous labour becomes complicated and a caesarean section is performed, the placenta is manually removed or the birth canal is repaired after delivery, e.g. in the case of haemorrhage. In these cases, the presence of an anaesthetist is essential.

These procedures must be performed under anaesthesia – either under local anaesthesia (if time and conditions permit or if the parturient already has an epidural catheter in place) or under general anaesthesia. In these cases, the type of anaesthesia is chosen with regard to the condition of both the mother and the baby. If the parturient does not already have an epidural catheter in place, general anaesthesia is necessary far more often due to the pressing circumstances. The anaesthetist needs to quickly obtain the following information from the parturient:

- ❖ whether she is allergic to any medication, especially anaesthetics and antibiotics
- ❖ when was the last time she ate and drank
- ❖ whether she is being treated or has been treated for any serious illness
- ❖ if she has ever had any complications related to anaesthesia

As it is impossible to predict whether surgery will be required during or after spontaneous labour, it is recommended that certain rules for increasing the safety of anaesthesia and reducing the risk of complications be followed. The most serious problem with acutely administered anaesthesia is a full stomach (vomiting and inhalation of stomach contents into the lungs). Therefore, during childbirth, the parturient should not eat anything. On the other hand, drinking is advisable, e.g. still water/mineral water, even flavoured, or lightly sweetened tea. Liquids should be taken in small amounts but often, i.e. in small sips of approximately 200 ml over the course of an hour. Do not drink carbonated water, sour juices or milk.

As there is not always enough time in urgent situations to explain in detail, let alone answer all possible questions, it is advisable for the parturient to get as much information as possible in advance and to fill out the anaesthesia questionnaire. This applies even in cases where no complications are expected or the parturient does not wish to use the epidural analgesia option.

In conclusion...

If you have any further questions about anaesthesia or analgesia during labour, your anaesthetist or obstetrician will be happy to answer them.

Anaesthetists at Thomayer University Hospital