Anesthesia PATIENT EDUCATION

WHAT TO EXPECT BEFORE DELIVERY

Before your baby's delivery, you will undergo a pre-procedure evaluation by your anesthesiologist at the Eisenhower Family Birth Center. This evaluation focuses on your health and choosing an anesthetic plan that is right for your delivery.

This can include:

- A review of your medical history, including medications you are taking and any allergies you may have
- A physical examination
- Blood and lab tests

Should you have any questions or concerns about the anesthetic, please address them with your anesthesiologist during the pre-procedure interview.

TYPES OF ANESTHESIA

"Anesthesia" is the term for different types of medicine patients receive before and during delivery to help alleviate pain during the delivery. While you are at the Eisenhower Family Birth Center you will either be delivering your baby vaginally or via Cesarean section. Most patients choose "regional" anesthesia in these situations. Regional anesthesia is intended to alleviate pain during delivery but allows you to be awake for your baby's birth. It is the most effective and most commonly used therapy for pain relief during labor and delivery. The goals of your anesthesiologist during delivery are to keep both you and your baby comfortable and safe.



ANESTHESIA FOR VAGINAL DELIVERY

If you are delivering your baby vaginally your doctor may recommend you receive an "epidural". Epidural anesthesia involves using a needle to place a small catheter (a small tube) in your lower back which will deliver medicine intended to reduce the pain. If you get an epidural during labor and end up requiring an unplanned Cesarean section, you will often be able to receive medicine through the catheter already in place. Sometimes, anesthesiologists use a combination of spinal and epidural anesthesia. The medicine can usually remove the pain in the lower part of your body and will normally last for the duration of your delivery.

ANESTHESIA FOR CESAREAN SECTION

If you are delivering your baby via Cesarean section, your anesthesiologist may recommend you undergo regional anesthesia or general anesthesia. The type of regional anesthesia most often used for Cesarean sections is called "spinal" anesthesia. For this, the anesthesiologist puts a small needle in your lower back, and injects medicine to numb the nerves in your spine. This numbing effect is intended to last approximately two (2) to four (4) hours.

See reverse side for additional information regarding general anesthesia and associated risks.



39000 Bob Hope Drive Rancho Mirage, California 92270

GENERAL ANESTHESIA

In addition to spinal anesthesia, general anesthesia is another option for Cesarean section. With this type of anesthesia you will not feel, see, or hear anything during surgery. The medicine is usually given through an IV and after you are asleep, the anesthesiologist will carefully place a breathing tube in your throat to help you breathe. The breathing tube will be removed before you wake up.

General anesthesia might be used if:

- You have a condition that makes regional anesthesia unsafe or risky
- You need an emergency Cesarean section and there is not enough time to give you regional anesthesia
- Regional anesthesia fails to work, or does not make you comfortable enough for surgery

NERVE BLOCK

In addition to receiving either regional or general anesthesia for your Cesarean section, your anesthesiologist may recommend you receive a "nerve block". This is a targeted administration of local anesthesia to numb the nerves that may cause the sensation of pain in the abdomen after your surgery. This nerve block is intended to help with pain control post-operatively for about 24 to 48 hours and is performed while you are on the operating table after your Cesarean section is complete.

RISKS

Some of the risks of an epidural or spinal anesthetic include the following:

- After you get an epidural, you will need to stay in bed and will not be able to walk around. Your legs will feel weak after an epidural, which is an expected and normal result
- An epidural or spinal can lower your blood pressure, which may temporarily drop the baby's heart rate
- After you give birth, you may have a headache
- You may experience backache
- You may experience shivering
- You may experience nausea and vomiting

Some of the more severe, but rare, complications of epidural and spinal anesthetics include:

- An infection in your back
- Nerve injury
- Difficulty breathing
- Cardiac arrest (very rare)

Some of the risks of a general anesthetic include the following:

- Sore throat
- Nausea, vomiting
- Hoarseness and dizziness
- There is a small risk that damage to your teeth can occur when placing the breathing tube so it is important to let the anesthesiologist know if you have any loose teeth or dentures.

Some risks of a nerve block include the following:

- Infection
- Bleeding
- Nerve injury

Some of the severe, but rare, complications of a nerve block can include:

• Local anesthetic toxicity causing seizures and cardiac arrest

It is impossible to include every complication in this list, however rest assured that you will have a board certified and experienced anesthesiologist who is prepared to handle any unexpected situation.

Keeping you safe is your anesthesiologist's main concern. Before surgery, you should feel comfortable asking your anesthesiologist any questions about the risks and benefits of anesthesia, and the type of anesthesia that is best for you. After your baby's delivery, your anesthesiologist will check on you as you recover.



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