



Anaesthesia Information

Monitored Anaesthetic Care (MAC)

Introduction

MAC (Monitored Anaesthetic Care) is provided by anaesthesiologists 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 anaesthesiologist.
- Adequate instructions for peri-operative preparation (e.g. patient must adequately fast for 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.)

Expected Outcomes

Generally, you will sleep and not feel any pain during the operation or the surgical procedure. This would relieve your feeling of embarrassment, fear and anxiousness.

Possible Risks and Complications

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

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 are 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. The patient may be drowsy and sleepy even after the surgical procedures.

Pre-anaesthesia Preparations

1. The anaesthetic procedure and possible complications will be explained by the anaesthetist and a consent form must be signed prior to the anaesthesia.
2. Please inform the doctor and nurse all your past medical history, previous surgical operations, current medication and any complication with drug or anaesthesia.
3. Routine tests such as blood test, ECG or X-ray may be performed if necessary.
4. No food or drink six hours before the anaesthesia.
5. For those patients receiving diabetic medications or weight loss injections, they should avoid related medications or injections for 3 days or a clear liquid diet for 24 hours, and a minimum fasting period of 6 hours for food and drinks prior to anaesthesia. Regarding the period of medication discontinuation and relevant details, you are strongly recommended to consult the attending doctor in advance.
6. If patients are receiving long-term medications, they should inform the attending doctor of the details and consult their expertise in advance.
7. Prior to the change of surgical gown before the operation, please take a shower if you need.
8. Please change into a surgical gown after removing all belongings including undergarments, dentures, jewellery and contact lenses.
9. Please empty your bladder before the operation.
10. Pre-medication may be given as a doctor's prescription if needed.

Frequently Asked Questions

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

The fasting time should be the same as preparing for having general anaesthesia (GA). Generally, no food or drink should be taken at least 6 hours before the procedure.

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

Generally,

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

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

- You should have a responsible adult to escort you home.
- You 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.

Should there be any enquiries or concerns, please consult the attending doctor.

Under the professional care of the doctor, you will gradually recover. We wish you all the best during your treatment and recovery.

If you have any questions after reading the entire leaflet, please write them down in the spaces provided in order for the doctor to further follow-up.

Compiled by Union Hospital Operating Theatre (OT) Governance Committee

The above information is for reference only, please enquire your physician for details
Our Hospital reserves the RIGHT to amend any information in this leaflet without prior notification

