

# Procedure Information Sheet – Monitored Anaesthetic Care

Hosp No. : HKID No.:

Case No. :

Name :

DOB : M/F

Adm Date : Contact No.:

## 1. Introduction

- 1.1. Monitored Anaesthetic Care (MAC) refers to a service in which an anaesthesiologist provides analgesia and sedation for a diagnostic or therapeutic procedure.
- 1.2. It involves administering a combination of medications for anxiolysis, sedation, and pain relief.
- 1.3. Depending on the level of sedation and surgical requirement, you may or may not be aware of your surroundings during the procedure.
- 1.4. The elements of MAC include:
  - 1.4.1. Pre-operative assessment with clear explanation by an anaesthesiologist.
  - 1.4.2. Intra-operative monitoring of your physiological status by an anaesthesiologist.
  - 1.4.3. Administrations of intravenous medication and supplemental oxygen to keep you comfortable.
  - 1.4.4. After the procedure, you will be monitored at the recovery bay until you are fit for discharge.

## 2. Procedural Preparation

- 2.1. You should be fasted for at least 6 hours before the procedure. Clear fluid is allowed for up to 2-3 hours before the procedure.
- 2.2. You should provide your medical history and other relevant information to the medical professional.
- 2.3. A valid consent for MAC should be signed after assessment and clear explanation by the anaesthesiologist.

#### 3. Procedure

- 3.1. The responsible doctor or nurse will insert an intravenous catheter into your vein.
- 3.2. A blood pressure cuff, electrocardiographic electrodes and a pulse oximeter will be connected to your arm, chest and finger respectively to monitor your blood pressure, heart rate and rhythm, and oxygen saturation throughout the procedure.
- 3.3. Oxygen will be administered via an oxygen cannula placed in front of your nostrils.
- 3.4. Anaesthesiologist will administer intravenous medications via the intravenous catheter.
- 3.5. The level of sedation varies depending on procedural need, it can range from light where you just feel very relaxed, to deep where you are unaware of what is happening and only rouses to significant stimulation.
- 3.6. MAC keeps you relax and comfortable during the procedure but due to the short-acting nature of anaesthetic drugs, you are usually awake promptly at the end of the procedure.
- 3.7. You will need to stay in the recovery bay for a short duration after the procedure until your vital signs are stable for discharge.

#### 4. Recovery Phase

- 4.1. You should not eat or drink immediately after MAC, please follow the instruction given by health professionals.
- 4.2. You should not drive, operate machinery, sign any legal documents or drink alcohol for at least 24 hours after MAC.
- 4.3. It is strongly recommended that you are accompanied home by an adult who should stay with you at least for 24 hours if you live alone.

# 5. Possible Risks and Complications

- 5.1. In general, MAC is a safe procedure and carry low risks. The risks are different for every individual patient, depending on the type of surgery and pre-existing medical conditions. Thus, not every patient is suitable for MAC.
- 5.2. Pre-existing conditions increasing the risks for complications include chronic and acute medical conditions, morbid obesity, sleep apnea, cognitive dysfunction, movement disorder, chronic drug or alcohol abuse, extreme of age, etc.

GANA-F05E-R2-02/25 Page 1 of 2

Hosp No. : HKID No.:

Case No. :

Name

DOB : M/F

Adm Date : Contact No.:



# Procedure Information Sheet – Monitored Anaesthetic Care

- 5.3. Your anaesthetist will discuss with you the specific risks which pertaining your condition or the procedure 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.
- 5.4. Some common potential complications are:
  - 5.4.1. Aspiration/aspiration pneumonia, the protective pharyngeal and laryngeal reflexes are depressed by sedation.
  - 5.4.2. Airway obstruction and hypoxia as respiratory drive may be depressed by the sedation.
  - 5.4.3. Hemodynamic disturbance such as low blood pressure and heart rate, and other rare but serious complications such as stroke and myocardial infarction might occur due to adverse effects of drugs, anaesthesia or procedure related complications.
  - 5.4.4. The sedation may outlast the duration of the procedure which the patient may be drowsy and sleepy even after the surgical procedures.

#### 6. Remark

6.1. The above mentioned procedural information is by no means exhaustive, other unforeseen complications may occur in special patient groups or different individual. Please contact your physician for further enquiry.

#### 7. Reference

- 7.1. Manzoorul, M. (2013). Monitored Anaesthesia Care. Journal of the Bangladesh Society of Anaesthesiologists.
- 7.2. Guidelines for Safe Sedation for Diagnostic and Therapeutic Procedures. The Hong Kong College of Anaesthesiologists.

I acknowledged the above information concerning the operation or procedure. I have also been given the opportunity to ask questions and received adequate explanations concerning the condition and treatment plan.

Patient/ Relative Signature	:
Patient/ Relative Name:	
Date:	



Page 2 of 2 GANA-F05E-R2-02/25