

Anesthesia for Your Radiology Exam or Procedure

This handout explains the differences between general anesthesia and sedation. Both can be provided by an anesthesiologist for radiology procedures and exams that might be uncomfortable or cause stress. It explains what to expect, how to prepare, and what to do after having general anesthesia or sedation.

What is anesthesia?

General anesthesia is a combination of medications that put you in a state that is like being in a deep sleep before your procedure begins. You will not feel anything during the procedure and will not remember it after you wake up.

For general anesthesia, your anesthesia team may need to place a breathing device (intubation) to give you oxygen and anesthesia gas. Sedation is another type of anesthesia where you may not be completely unconscious but will get medications for comfort and to relieve anxiety.

How will I be given the anesthesia?

Your anesthesia provider will give you the medication directly into your vein through an *intravenous* (IV) line. The provider will use either IV medications or anesthesia gases to help you stay asleep during the procedure. The anesthesia provider will closely watch your heart rate, blood pressure, breathing, and blood oxygen level to make sure you are handling the medication well.



You will receive the anesthesia medicine through an IV line.

Before Your Procedure

Before your procedure, we will assess your health and review your medical history, any allergies you have, and any medications you are taking. You may need to stop taking some medications before your procedure.

You will need to bring a complete list of all the medications you take. This includes medications your doctor has prescribed, as well as other medications or supplements that you take without a prescription.

Be sure to tell your anesthesia provider if you:

- Have *sleep apnea* or other breathing problems (you might use a CPAP or BiPAP device while you sleep)
- Use high doses of prescription pain medications, such as *opioids* (for example, oxycodone or tramadol)
- Have severe heart, lung, or kidney disease
- Have had a bad reaction to anesthesia in the past
- Know that you have problems with your airway or swallowing, or you have a limited mouth opening
- Have a mass (such as a cyst or tumor) in your neck
- Have an enlarged tongue or tonsils that cannot be seen



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- Cannot lie flat on your back for about 1 hour because of back or breathing problems
- Have a hard time lying still during medical procedures
- Weigh more than 300 pounds (136 kilograms)
- Are currently pregnant

Preparing for Your Anesthesia

- Do not eat or drink anything after 12 a.m. / midnight the night before your procedure.
- If you need to take medications, you may have small sips (less than 2 ounces) of water.

On the Day of Your Procedure

- Take all your usual medications on the day of your procedure unless your doctor told you not to take a certain medication.
- Do not take vitamins and other supplements on the day you will have anesthesia. They may upset an empty stomach.
- Bring a list of **all** your medications with you to the hospital.
- You **must** bring a responsible adult with you who can drive you home after your procedure. You cannot drive yourself home or take a bus, taxi, or shuttle by yourself.
- You also need to arrange for someone to stay with you the rest of the day after you get home from the hospital.

When You Arrive at the Hospital

- A staff member will do a health assessment.
- Your family member or friend can stay with you until it is time for your procedure to start.
- An anesthesiologist will review the risks and benefits of anesthesia. Please ask any questions you have. This doctor will ask you to sign a consent form after answering your questions.
- The medical team will ask you to confirm your name and birthday. This is for your safety. They will also review your anesthesia and your procedure or exam one more time.
- An IV line will be started to give you anesthesia and other medications, if needed.
- After you are asleep, you may have a breathing tube inserted in your throat.

Possible Side Effects or Complications

Side effects or complications linked with having general anesthesia include:

- Nausea and vomiting
- Sore throat or hoarseness
- Shivering
- Damage to your teeth, lips, or tongue
- Allergic reaction to the anesthesia medication

These complications are very rare:

- Breathing problems
- Irregular heart rate
- Cardiac arrest (heart attack)
- Stroke

After Your Procedure or Exam

- You will stay in the recovery room for about 2 to 3 hours. Nurses will watch you until you are fully awake.
- If you had a procedure that involved a blood vessel puncture, you will then go to the 4-South unit of the hospital. Nurses will watch you for 2 to 6 hours and make sure there are no signs of bleeding
- During your recovery time:
 - We will give you instructions for self-care at home.
 - You may not remember much about your procedure or exam. This is normal.
 - Most patients can eat and drink once they are fully awake.
 - Your nurses will let you know when it is safe for you to leave. This will happen when:
 - You are awake and alert.
 - You can use the restroom and walk.
 - **Your responsible person is there to take you home.**

Important Precautions at Home

For 24 hours after your procedure, do not:

- Drive
- Sign important papers
- Drink alcohol
- Use machinery
- Be responsible for the care of another person

Who to Call

University of Washington Medical Center and Northwest Hospital

Weekdays from 8 a.m. to 4:30 p.m., call the Interventional Radiology Department:

- **Montlake:** 206.598.6209, option 2
- **Northwest:** 206.598.6209, option 3

Harborview Medical Center: Weekdays from 8 a.m. to 4:30 p.m., call the Interventional Radiology Department at 206.744.2857.

After hours and on weekends and holidays: Call 206.598.6190 and ask to page the Interventional Radiology resident on call.

Questions?

Your questions are important. Call your doctor or healthcare provider if you have questions or concerns.

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