

Anesthesia

You will discuss your anesthesia options with the anesthesiologist / CRNA prior to your procedure. He/she will explain the risks and benefits of each option and help determine which is best for you. Below is an outline of what will likely occur.

Shoulder Surgery:

You will carefully be placed in a “beach chair” position as if you are sitting in a recliner. Your head will be padded in a cradle so that the shoulder can be accessed from both the front and the back. Surgical drapes are placed to maintain a sterile field and cross the face. Due to this positioning for the surgery a *general anesthetic* is required. Without a general anesthetic this would become very claustrophobic and the anesthesia team would have difficulty accessing your airway if there were a problem. In addition to a general anesthetic, *regional blockade* is recommended. By effectively numbing the arm and shoulder with an injected anesthetic, less medication may be required to maintain general anesthesia and keep you asleep. This may lead to less post-operative nausea and/or grogginess. Additionally, you may wake up pain-free and be able to initiate your oral medications prior to experiencing any pain. It has been well proven that by blocking pain receptors prior to experiencing pain (taking pain meds while your arm is still numb), the subsequent pain response will be decreased.

Elbow / Wrist Surgery:

If possible, your surgery will be performed under a *regional* anesthetic that will make your entire arm numb. You can still be heavily sedated so you are unaware of anything that is happening and, if necessary, supplemental general anesthetic may be provided.

Hand / Finger Surgery:

Ideally, your procedure will be performed under a *regional* block (the entire arm is numb) or a *local* block (the operative part of your hand is numb). Either way, you can be sedated so you are unaware of anything that is happening. Some procedures can be performed under straight local (no sedation) and you will be able to drive yourself home.

Pre-operative medications: You may be provided with a few different pills to take with a sip of water prior to the procedure. These will help block your pain receptors before the procedure even begins and hopefully lessen the amount of post-operative medication you will need.

General Anesthesia: This requires a tube in your airway so that a machine can help control your breathing. Intravenous and inhaled anesthetics will be provided to keep you asleep during the procedure.

Regional Anesthesia: Prior to the procedure numbing medicine will be injected around the nerves that go to your arm; a special technique is used to localize the nerves either at the lateral base of your neck or in your axilla (armpit). Depending on the combination of medicines given, the

technique used and your metabolism of the medications, the numbing can last from 4 to 24 hrs. A mild sedative is provided to make the procedure more tolerable.