Anaesthetic information for your operation

www.dunkeldanaestheticpractice.com



Dr. Ernest Welch

MBBCh (Wits), DA (SA), FCA (SA)

Specialist Anaesthesiologist

Practice No. 004 1769

Practice: 011-880-1699 / 463-7821 Accounts / Quotes: 011-880-1699 Email: practicerni@iafrica.com

As you will probably only see your anaesthesiologist on the day of your operation, the following information sheet explains our role in ensuring the safe conduct of your anaesthetic and operation as well as informing you about the fees that we charge. Please retain this information sheet for your records.

Specialist anaesthesiologists are medical doctors who have, in addition, undergone a minimum of 4 years of specialist training to enable them to anaesthetise you for any operation including cardiac, neuro and paediatric surgery.

Medical history

Please complete the accompanying medical questionnaire to highlight potential problems while you are undergoing surgery and anaesthesia. Please bring information on any medical conditions you may have to the hospital with you when you are admitted for your operation.

Medication

- 1. Bring your current medication to the hospital if there is any chance that you will be staying overnight or need to take this medication while in the hospital. Bring your CPAP mask if you use one.
- 2. Bring a list of any medication that you are currently on, or have taken in the past 3 months (including homeopathic and natural products).
- 3. Bring a list of any allergies you may have.
- 4. Take your routine medication as normal. (If you are taking Warfarin, Aspirin, Plavix or any other blood thinners or any diabetic drugs please ask the surgeon when you should stop these before the operation).

Eating before an anaesthetic or sedation

YOU NEED TO BE STARVED FOR ALL ANAESTHETICS AND SEDATION.

All patients including children must have no food or milk products from 6 hours before admission, but may have clear fluids (water, black tea or clear apple juice) up to 2 hours before you report to the hospital on the day of your operation.

- Morning surgery No food or milk products after midnight! Clear fluids up to 5am.
- Afternoon surgery No food or milk products after an early light breakfast (before 7am)! Clear fluids up to 11am.

When will your operation be done

Although an operating list is scheduled to start at a particular time, only one patient can be anaesthetised and operated on at a time. This means that your surgery may be hours after the scheduled start time of the list. You may be given a rough estimate of the start time for your procedure. If the surgeon offers you an admission time after the start time of a list, you may only see the anaesthesiologist in the theatre waiting area. If you have a medical condition or anything else to discuss with the anaesthesiologist please either make contact before the day of surgery or ensure you are admitted to the ward at least one hour before the start time of the list. Bring things to entertain yourself or your child in hospital while you wait.

After an anaesthetic or sedation

You will not be allowed to drive (arrange for a lift home), operate dangerous machinery or make important decisions for 24 hours after your anaesthesia. DO NOT CONSUME ALCOHOL post anaesthesia and until you have stopped all post-operative prescribed medication (i.e. pain killers, anti-inflammatories, antibiotics etc.) If in doubt, please consult your treating surgeon or anaesthesiologist.

Complications during anaesthesia

Anaesthesia is not without risk. Adverse events can occur during any anaesthetic, which can range from trivial to brain damage or death. These events may occur due to: Reactions to anaesthetic drugs, underlying medical diseases, complications with procedures that have to be performed or due to surgery. Anaesthetists have been trained to manage these complications which may incur further medical expenses. If a complication persists for more than 48 hours please inform your anaesthesiologist or surgeon.

The following list covers some of the complications that may occur under anaesthesia or after an operation.

Common complication	Rare complications	Very rare complications	Brain damage or Death					
(1 to 10% of cases)	(Less than 1 in 1000 cases)	(1 in 10,000 to 1 in 200,000 cases)	(Less than 1 in 250,000					
Minimal treatment usually	May require further treatment	Often serious with long-term damage	cases)					
Nausea and vomiting Sore throat Shivering or feeling cold Headache Dizziness Itching Pain during injection of drugs Swelling or bruising at the infusion site. Confusion or memory loss (common if elderly)	Injuries to teeth, crowns, lips, tongue and mouth Hoarse voice, voice changes Vocal cord injuries Painful muscles Difficulty in urinating Difficulty breathing Visual disturbances Worsening of underlying medical conditions like diabetes, asthma or heart disease	Eye injuries Nerve injuries causing paralysis Lung infection Awareness of the operation Bleeding Stroke Allergic reactions Unexpected reactions to anaesthetic drugs Inherited reactions to drugs (Malignant hyperthermia, Scoline apnoea, porphyria)	 Due to any other complication getting more severe Heart attacks Emboli (clots) Lack of oxygen 					
Side effects or interactions from post-operative medication can cause many complications that vary in severity								

Complications arising due to procedures that may be performed during your anaesthetic

Procedure	Complication
Intravenous line ("drip")	Pain, swelling, bleeding, clots, inflammation, infection, repeated insertions
Central line for specialised monitoring or	Pain, swelling, bleeding, clots, inflammation, infection, repeated insertions, puncture of lung,
therapy	damage to artery or nerve.
Arterial line for specialised monitoring	Pain, swelling, bleeding, clots, inflammation, infection, repeated insertions, loss of blood flow to
	the hand leading to death of fingers
Airway management	Damage to lips, teeth, tongue, palate, throat, vocal cords, hoarseness, inhalation of stomach
	contents (aspiration), pneumonia, obstruction of breathing, failure to manage the airway which
	may require an emergency operative procedure.
Nerve blocks, spinal or epidural injection	Nerve damage, paralysis, backache, headache, nausea, vomiting, dizziness, shortness of
	breath, pain, bleeding, inadequate pain control, repeated attempts.

Anaesthetic Accounts

- The fees charged and codes used by the anaesthesiologist fall within the guidelines of the Health Professions Council of South Africa.
- The anaesthetic fee is based on a rate determined by each individual anaesthesiologist based on their training, expertise, experience and practice costs and do not relate to any medical scheme rate or the old NHRPL. (Competition Commission ruling 2004)
- You will receive a completely separate account from the anaesthesiologist. (There will also be accounts from the surgeon, radiologists, pathology, physiotherapist, pharmacist and hospital.)
- The cost of anaesthesia is dependent on the time taken and procedure complexity. As it is impossible to predict how long a procedure will take, this makes estimating the cost of an anaesthetic extremely difficult. The average cost estimate table below is therefore based on the average time taken for a procedure and assumes the procedure is of average complexity.
- If the procedure takes longer than the estimated time the cost will increase according to the duration of the procedure.
- Excluded are additional costs that will be incurred for modifiers such as: bone and joint surgery, obesity, paediatrics, elderly, ICU admission, pain relief techniques, blood pressure control, revision surgery and emergencies or cases not booked on routine lists
- If your BMI (body mass index) is greater than 35 kg/m² you will be charged an additional 50% of the anaesthetic fee.
- To calculate BMI = weight (kg)/{height (m) x height (m)}
- Explanations of the codes on the account can be obtained from The Board of Health Funders (011-537-0200).
- As all medical insurance companies offer cover at different rates your medical aid will reimburse you for your anaesthetic account at a rate based on the plan you have selected and the rules of your medical aid fund. This can vary from 30% (most "100%" plans) to 100% (most 300% plans) of the amount charged. The total amount may not be covered by your medical aid. You will be responsible for the short fall.
- The anaesthesiologist is not a designated service provider (DSP) of any medical insurance company and therefore prescribed minimum benefit (PMB) conditions may not be covered in full by your medical insurance. (Check with your insurer).
- The anaesthesiologist does not deal with your medical aid re account payment. You are responsible for settling the anaesthetic account in full with the anaesthesiologist and claiming from your medical aid.
- An account may be sent to your medical aid to help with your claim, but you are still responsible for payment of your anaesthetic account to your anaesthesiologist and interest and all legal fees that arise from any accounts that are not paid in full within 30 days.

Private Patients (procedures being paid for privately and not covered by your medical aid/ insurance)

- Please note that treatment of complications arising from anaesthesia or surgery may or may not be covered by your medical aid/ insurance.
- All costs (that may include other medical professionals and treatment) associated with complications will be for your account.

Estimated Anaesthetic Cost for 2024 (includes 15% VAT)

Procedure	Estimated Time	Estimated Anaesthetic fee	Approximate "100%" medical scheme rate	Shortfall at 100% scheme rate
Basic anaesthetic less than 30 min	30 min	R 4490	R 1497	-R 2 993
Basic anaesthetic 30 min to 60 min	60 min	R 5 930	R 1977	-R 3 953
Basic anaesthetic 60 to 90 min	90 min	R 8 090	R 2697	-R 5 393
Basic anaesthetic 90 min to 2 hrs	2 hours	R 10 250	R 3417	-R 6 833
Basic anaesthetic 2 to 2h 30 min	2h 30 min	R 12 410	R 4 137	-R 8 273
Basic anaesthetic 2h 30 min to 3 hours	3 hours	R 14 570	R 4857	-R 9713
Basic anaesthetic 3 to 3 h 30 min	3h 30 min	R 16 730	R 5 577	-R 11 153
Basic anaesthetic 3 h 30 min to 4 hours	4 hours	R 18 890	R 6 297	-R 12 593
Every additional 15 min	per 15 min	R 1 080	R 360	-R 720
For surgery on head or neck or back	add	R 360	R 120	-R 240

Additional costs if applicable which must be added to the estimated anaesthetic fee

Pain control via PCA / Spinal /Epidural/nerve block	add	R	1 500	R	500	-R	1 000
Age < 1 yr or > 70 years	add	R	1 080	R	360	-R	720
BMI > 35 (Height/weight²)	per 15 min	R	540	R	180	-R	360
ICU admission	add	R	2 500	R	833	-R	1 667
Arterial line or central line	add	R	1 250	R	417	-R	833
Blood pressure control (FESS and nasal surgery)	per 15 min	R	360	R	120	-R	240

- Please contact practicerni@jafrica.com if you require a more detailed quote or have any questions regarding your anaesthetic.
- For more information you can also visit www.dunkeldanaestheticpractice.com.
- Procedure for complaints, queries or comments on the anaesthesia and /or billing: A form to request a formal reply on any aspect of the anaesthesia or billing is available on http://www.dunkeldanaestheticpractice.com/dr-ernest-welch/ which can be forwarded to Dr Welch at practicerni@iafrica.com. If this is not resolved to your satisfaction you can forward it to the South African Society of Anaesthesiologists at ceo@sasaweb.co.za (www.sasaweb.com/.

Please complete the accompanying Anaesthetic Consent Form and bring it to your operation to hand to Dr Welch
Please retain this information sheet for your records.

CONSENT FOR ANAESTHESIA

Dr. Ernest Welch

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Specialist Anaesthesiologist

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Member of the South African society of Anaesthesiologists

, consent to		undergoing anaesthesia for _	
_	(Patients full names)		(Procedure)

- I acknowledge that I have received, read and understand the Anaesthetic information sheet and /or that I am able to get information about anaesthesia risks
 and complications from www.dunkeldanaestheticpractice.com.
- I confirm that this information clarifies for me, the risks and complications generally associated with my anaesthesia. Should I have any queries as to the
 purpose or anaesthetic technique or have concerns regarding my particular risk, I will discuss these at my pre-anaesthetic consultation or contact the
 anaesthesiologist before my surgery. I have been afforded an opportunity to ask questions regarding my anaesthesia.
- I understand that the anaesthetic technique discussed with me may need to be altered and agents and monitors may be used "off label" and may not be funded by my medical insurance. I exempt the anaesthesiologist from any adverse managed care requirements of my medical scheme.
- I understand that no one can guarantee an incident free anaesthetic and procedure.
- I understand that the hospital supplies equipment and nursing staff which cannot be guaranteed by the anaesthesiologist.
- I agree not to drive, operate dangerous machinery, or make important decisions for 24 hours after the recovery from anaesthesia and to refrain from alcohol while taking any medication prescribed to me by the anaesthesiologist.

Payment agreement between the Anaesthesiologist and person responsible for paying the account.

Payment:

- I acknowledge that the anaesthesiologist will bill separately from the surgeon and hospital.
- Anaesthesia costs are calculated using time and added risk modifiers so may be more or less than the estimate provided.
- Any cost estimate assumes average surgical time and average complexity. Additional fees will be charged if the procedure exceeds the average surgical
 duration, or if unanticipated complications arise or if additional treatment and procedures are performed.
- Additional risk modifiers such as: fractures, bone and joint surgery, obesity, paediatrics, elderly, ICU admission, pain relief techniques, blood pressure
 control, revision surgery and emergencies or cases not booked on routine lists may not be included in the cost estimate and need to be added to the time
 cost estimate.
- I acknowledge that I have received and read the *Anaesthetic information sheet* and/or that I am also able to get information about anaesthetic billing from www.dunkeldanaestheticpractice.com and request a specific cost estimate from the anaesthetist.
- I am aware that I have to determine the estimated duration of surgery from the anaesthesiologist or surgeon to obtain the total estimated cost of my
 anaesthesia.

Cost of the anaesthetic:

The estimated time cost of this anaesthetic will be approximately:	R	4 490	for the first 30 minutes or part thereof
The ongoing additional charge after 30 minutes is approximately	R	1 080	for every 15 minutes or part thereof

Estimated additional amounts that must be added to the time cost for the following common risk modifiers (not all modifiers are included):

Age less than 1 year or greater than 70 years	+R	1 080	Once off
Specialised pain control procedures (PCA, nerve, spinal or epidural block)	+R	1 800	Once off per procedure
Intensive Care	+R	2 500	Once off
Body mass index greater than 35 kg/m ² approximately:	+R	540	per 15 minutes or part thereof
Emergencies approximately:	+R	540	per 15 minutes or part thereof
Arterial or central line insertion	+R	1 250	Once off per procedure

The final estimated cost is determined by adding the costs of the duration of anaesthesia and all the risk modifiers.

- I understand that medical insurance companies offer cover at different rates. The medical insurance I have chosen may reimburse me at between 33% (called 100% by some medical aids) and the full amount of the estimated cost, dependent on my chosen plan.
- The anaesthesiologist is not a designated service provider (DSP) of any medical insurance company and therefore prescribed minimum benefit (PMB)
 conditions may not be covered in full by my medical insurance (this is determined by the rules of my medical insurer).
- I understand that I am personally responsible for payment of the account and undertake to settle my account on completion of service days after which interest will be charged. If I fail to pay any amounts that are due, I agree that all amounts owing will immediately become due and payable and the anaesthetist or their nominated representative may access any of my available information and disclose my failure to pay or erratic payments to any credit bureaus or 3rd party without incurring any liability therefore. I will also be liable for interest, tracing fees, legal costs and collection fees.
- I have read, understood and agree to the contents herein. I confirm that I am 18 years of age or older and the particulars and all information furnished by me are in all respects true and complete. Specifically, alterations/ additions to this form are only valid if countersigned by both parties.

Confidentiality & protection of personal information: I agree that any personal, medical and billing information collected in terms of this consent is to be utilised for healthcare of the patient, billing, collection of debt and processing of queries or complaints. It can be shared with any third party provided it's in the interests of any party involved. Personal information is securely stored and accessible only to third parties with signed confidentiality clauses as part of their employment agreements/ contracts. I consent to communication with my family/nominated others with respect to my medical care and account.

Name	(Patient, Parent, Guardian, Guarantor)	Signature	Place	Date
Name	(Anaesthesiologist)	Signature	Place	Date

Patient details

Full names and surname:								Title:			
ID Number:											Age:
Occupation:											

Person responsible (Guarantor) for paying the account

I nominate the party listed as "person responsible for payment of the account" as Guarantor who is aware of this responsibility. I understand that a quarantor does not absolve me from my responsibility for payment, that I am personally liable for the account and bound by the terms of this agreement.

guarantor does not absolve me from my	responsibility	y tor payme	nt, that I am	personally	lable for the	account and	d bound by	the terms of	this agre	ement.	
Full names and surname:								Title:			
ID Number:											
Occupation:	•			Busines	s/Emplo	yers nai	me:	·	•		
Relationship to patient:		Spouse telephone number:									
Postal address:				Residen	tial addı	ress:					
eMail:											
Telephone (home):			•	Telephone (work):							
Fax:			(Cell number:							
Medical aid name:			1	Medical aid number:							
Members name:				Authori	sation n	umber:					
Plan:			(Gap cov	er:	Yes	No				
Contact not living with you		Telepho	ne num	ber:							

Patients Medical details (please complete)

		e a e a e a e a	(p.cc	ise complete,				
	Weight:				es (weeks_)		
Last food at:	h	Las	t fluid at:	:h				
Smoking / Vape:	No Yes /day	Alc	ohol: nil	/ social / modera	te / heavy			
Allergies:								
Current Medication	on:							
Previous anaesth	etics (for what & when):						
Problems with an	y anaesthetic:							
Family member w	vith anaesthetic proble	ms:						
Has the patient e	ver had the following?							
Scoline Apnoea		Yes	No	Porphyria	Yes	No		
Malignant Hyperth	ermia	Yes	No	Diabetes	Yes	No		
High blood pressur	e	Yes	No	Heart disease	Yes	No		
Asthma, Bronchitis	, emphysema	Yes	No	Thyroid problems	Yes	No		
Obstructive sleep a	pnoea or severe snoring	Yes	No	Recent cold or flu	Yes	No		
Gastric ulcer, reflux	k, Crohns or irritable bow	el Yes	No	Epilepsy	Yes	No		
Kidney or bladder	disease	Yes	No	Stroke or blackou	t Yes	No		
False, loose, chippe	ed, crowned teeth	Yes	No	Easy bleeding	Yes	No		
Aspirin in last 2 we	eks	Yes	No	Muscle disease	Yes	No		
Does the patient co	onsent to a blood transfu	sion if neces	sary		Yes	No		
Details on the above or anything else that you feel the anaesthetist should know:								