

## **In the Theatre**

### **Operating Room Reception**

In the theatre, you will be taken to a reception area or directly to the anaesthetic room. Here you will again be asked your personal details. The site of your operation and your consent form will be checked. There is usually a bit more waiting at this stage.

Theatre staff normally wear coloured 'pyjamas' and paper hats. Because of this, they all look similar but you will probably recognise your Anaesthetist as you will have met him/her already.

### **The Anaesthetic Room**

This room is where some basic preparatory steps are taken for your anaesthetic. There will be an anaesthetic nurse and/or theatre technician assisting your Anaesthetist. S/he will attach Electrocardiograph (ECG) stickers and leads to your chest that will later monitor your heart, and a blood pressure cuff—this bit is sometimes done in the theatre.

Your Anaesthetist may insert an intravenous cannula—usually in to the back of your hand—and this may be connected up to a 'drip'. In some patients this can be difficult and may need a few attempts, so it helps if you try to keep your arms warm on the trip to theatre. The 'drip' is usually a solution of salt and water—saline—that helps to keep you well hydrated. You may be given a mild sedative at this stage to calm any last minute nerves, which are very common—this drug also affects the memory and many patients don't remember anything further until they wake up in recovery. If you are cold, please ask for an extra blanket.

If you are having a local or regional anaesthetic, this will usually be done at this stage.

## **The Theatre**

When they are ready for you in theatre, you will be wheeled in to the theatre on a trolley. There will be several people in here, those you have already met plus at least two more nurses. It often seems busy, cold and noisy; there may be music playing. We then use a plastic board to slide you over on to the theatre operating table—this is usually fairly cold and hard. The ECG leads and blood pressure cuff will be attached to a machine—the monitor—as will a peg that clips on to your finger and measures the level of oxygen in your blood. An oxygen mask may be placed over your face. The Anaesthetist will then inject some drugs in to your intravenous line—this may sting a bit—and you will fall asleep.

During the procedure, the Anaesthetist ensures that you continue to receive adequate drugs to keep you asleep and monitors the functioning of your heart and lungs. Often, an 'airway' will be placed—after you are asleep—in to your throat to allow you to breathe more easily.