
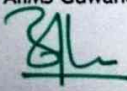



AIIMSGHY Hospital	Doc No.	E/NABH /AIIMSGHY/ COP 07/ 05
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POLICY & PROCEDURE ON ADMINISTRATION OF ANAESTHESIA

ALL INDIA INSTITUTE OF MEDICAL SCIENCES,
GUWAHATI






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AIIMSGHY Hospital POLICY & PROCEDURE ON ADMINISTRATION OF ANAESTHESIA	Doc No.	E/NABH /AIIMSGHY/ COP 07/05
	Issue No.	01
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Preparation	Approval	Issue
		

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AIIMSGHY Hospital POLICY & PROCEDURE ON ADMINISTRATION OF ANAESTHESIA	Doc No.	E/NABH /AIIMSGHY/ COP 07/05
	Issue No.	01
	Rev. No.	00
	Date	09/12/2025

Contents

Sr. No.	Topics
1.0	Purpose
2.0	Scope
3.0	Responsibility
4.0	Abbreviations
5.0	Reference
6.0 - 11.0	Policy and Procedure
12.0	Record Generated

COP 7 – POLICY & PROCEDURE ON ADMINISTRATION OF ANAESTHESIA

1.0 PURPOSE

To provide guidelines for the safe and effective administration of anaesthesia so that patient needs and expectations are met and patient satisfaction is enhanced on a continuous basis.

2.0 SCOPE

This policy applies to **all patients undergoing any form of anaesthesia or sedation** including general, regional, neuraxial, local anaesthesia with sedation, and dissociative sedation at **All India Institute of Medical Sciences, Guwahati**.

3.0 RESPONSIBILITY

- Anaesthesiologists
- Medical Staff

AIIMSGHY Hospital POLICY & PROCEDURE ON ADMINISTRATION OF ANAESTHESIA	Doc No.	E/NABH /AIIMSGHY/ COP 07/ 05
	Issue No.	01
	Rev. No.	00
	Date	09/12/2025

- Nursing Staff
- Paramedical Staff

4.0 ABBREVIATIONS

NABH – National Accreditation Board for Hospitals and Healthcare Providers
COP – Care of Patients

5.0 REFERENCE

5.1 NABH – Pre-Accreditation Entry Level Standards for Hospitals, First Edition, April 2014

6.0 POLICY

6.1 Administration of Anaesthesia

The Anaesthesia Care Team is responsible for:

6.1.1 Pre-Anaesthetic Evaluation

- All patients shall undergo pre-anaesthesia assessment by a qualified anaesthesiologist
- Evaluation may be done one day prior or on the day of surgery in PAC clinic / bedside
- Findings are documented in the pre-anaesthesia evaluation form
- Anaesthesia plan includes:
 - Type of anaesthesia
 - Monitoring plan
 - Intra-operative management
 - Post-operative analgesia

6.1.2 Prescribing Anaesthesia Plan

- Anaesthesiologist prescribes the anaesthesia plan
- Risks, benefits, and alternatives are explained
- Informed consent is obtained

6.1.3 Management of Anaesthesia

- Anaesthesia is administered only by anaesthesiologists
- Critical events are immediately escalated to the HOD Anaesthesia
- Delegation of tasks is done only to qualified personnel

6.1.4 Post-Anaesthesia Care

AIIMSGHY Hospital POLICY & PROCEDURE ON ADMINISTRATION OF ANAESTHESIA	Doc No.	E/NABH /AIIMSGHY/ COP 07/05
	Issue No.	01
	Rev. No.	00
	Date	09/12/2025

- Routine PACU care delegated to nursing staff
- Management of complications remains the responsibility of anaesthesiologist
- Surgeon provides peri-operative medical oversight as required

6.2 Checklist for Administration of Anaesthesia

- Pre-anaesthesia assessment documented
- Immediate pre-operative re-evaluation done
- Informed consent obtained
- Continuous intra-operative monitoring documented
- Post-anaesthesia monitoring and discharge criteria applied
- All adverse anaesthesia events documented

6.3 Pre-Anaesthesia Evaluation

Anaesthesiologist is responsible for:

- Reviewing medical records
- Interviewing and examining the patient
- Reviewing investigations and consultations
- Prescribing pre-operative medications
- Ensuring consent is obtained
- Documenting all findings in case sheet

6.4 Routine Pre-Operative Investigations

Routinely include:

- Hb, TLC, DLC, ESR
- Blood sugar, blood urea, creatinine
- Urine analysis
- ECG, Chest X-ray
- Additional tests based on age, comorbidities, and surgical risk

6.5 Intra-Procedural Monitoring

Includes documentation of:

- Patient re-evaluation prior to induction
- Equipment, gas supply, drug checks
- Vital signs and depth of anaesthesia
- Drugs and fluids administered
- Blood and blood products

AIIMSGHY Hospital

POLICY & PROCEDURE ON ADMINISTRATION OF ANAESTHESIA

Doc No.	E/NABH /AIIMSGHY/ COP 07/05
Issue No.	01
Rev. No.	00
Date	09/12/2025

- Unusual events
- Patient status at conclusion of anaesthesia

6.6 Post-Anaesthesia Care

- Time-based recording of vitals and consciousness
- Drugs administered and fluids infused
- Monitoring for complications
- Post-anaesthesia visits by anaesthesiologist

6.7 Regional / Neuraxial Anaesthesia

- Strict aseptic precautions
- Proper positioning
- Adequate blockade assessed before surgery
- Inadequate block supplemented with GA/sedation
- Monitoring as per GA protocols
- Resuscitation equipment readily available

6.8 General Anaesthesia – Discharge Criteria

Modified Aldrete Score $\geq 9/10$ or return to pre-operative baseline prior to transfer from Phase I Recovery.

6.9 Infection Control Protocols

- Liaison with Hospital Infection Control Team
- Mandatory hand hygiene
- Safe handling and disposal of sharps
- Decontamination of reusable equipment via CSSD
- Daily change of anaesthesia circuits
- Maximal barrier precautions for invasive procedures

6.10 Adverse Anaesthesia Events

- All adverse events monitored and recorded
- Patient shifted from PACU based on anaesthesiologist assessment

AIIMSGHY Hospital	Doc No.	E/NABH /AIIMSGHY/ COP 07/ 05
POLICY & PROCEDURE ON ADMINISTRATION OF ANAESTHESIA	Issue No.	01
	Rev. No.	00
	Date	09/12/2025

7.0 PROCEDURE

7.1 Conscious Sedation

- Administrative approval required
- Supervising physician must be credentialed
- Agents like thiopental, ketamine, propofol not used for IV conscious sedation
- Continuous monitoring and rescue capability mandatory

7.2 Planning for Care

- Pre-anaesthesia assessment documented
- Immediate pre-operative re-evaluation documented
- Risk-benefit discussion done

7.3 Consent

- Informed consent obtained by anaesthesiologist in English/Regional language.
- Explained to patient/family in understandable language

7.4 Detailed Pre-Anaesthesia Assessment

History

- Medical illnesses, drug intake
- Previous anaesthesia complications
- Allergy history
- Family history of anaesthesia problems
- Fasting status

Examination

- General examination and vitals
- Cardiovascular and respiratory assessment
- Airway assessment
- Dentures removed prior to procedure

Investigations

- As per institutional protocol and patient condition
- Specialist consultations obtained where required

7.5 Premedication

AIIMSGHY Hospital	Doc No.	E/NABH /AIIMSGHY/ COP 07/05
	Issue No.	01
POLICY & PROCEDURE ON ADMINISTRATION OF ANAESTHESIA	Rev. No.	00
	Date	09/12/2025

Given for:

- Anxiolysis
- Analgesia
- Reduction of gastric acidity and secretions
- Prevention of nausea, vomiting, allergic reactions

7.6 Restriction of Oral Intake

- Adults: 6–8 hours fasting
- Children/Newborns: 4 hours

7.7 Documentation

- Complete documentation of assessment, plan, reevaluation, and orders

7.8 Anaesthesia Procedure

- Continuous monitoring of vitals
- Documentation of drugs, fluids, urine output, CVP (where indicated)

7.9 Post-Anaesthesia Care

- PACU monitoring with ECG, SpO₂, BP
- Emergency airway equipment and drugs available
- Shift to ICU/Post-op ward after stabilization

7.10 Post-Operative Pain Management

- Epidural analgesia
- NSAIDs
- Opioids (Morphine, Fentanyl, Tramadol, etc.)
- Labour analgesia via epidural
- All adverse events analyzed by Pharmacy & Therapeutic Committee

8.0 TRANSFER FROM OT TO RECOVERY AREA

- Minimum 30 minutes PACU observation
- Transfer based on clinical stability

AIIMSGHY Hospital POLICY & PROCEDURE ON ADMINISTRATION OF ANAESTHESIA	Doc No.	E/NABH /AIIMSGHY/ COP 07/05
	Issue No.	01
	Rev. No.	00
	Date	09/12/2025

9.0 DISCHARGE FROM RECOVERY AREA

Discharge decision by anaesthesiologist and consultant surgeon based on:

- Respiratory rate
- Pulse
- Blood pressure
- Oxygen saturation
- Cardiac rhythm

10.0 GUIDELINES FOR ADVERSE ANAESTHESIA EVENTS

- Patient care takes priority
- Immediate notification of HOD and Administrator
- Equipment involved is sequestered
- Incident documented factually
- Incident report completed
- Continued involvement in follow-up care
- Multidisciplinary consultation as required

11.0 RECORDS GENERATED

1. Pre-Anaesthesia Evaluation Form
 2. Anaesthesia Consent Form
 3. Anaesthesia Notes
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