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## **POSITION STATEMENT**

### **Minimum Facilities for Preanaesthesia Consultations**

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#### **Preamble**

The preanaesthesia consultation is an integral part of the anaesthesia service, although often undertaken at a separate time and place to the actual anaesthesia.

In many situations such as day surgery and emergency surgery, the preanaesthesia consultation may immediately precede the commencement of anaesthesia.

The importance of the preanaesthesia consultation may be evidenced from recent reports by the Victorian Consultative Council on Anaesthetic Mortality and Morbidity, and from other sources (see References).

Adequate preparation for anaesthesia is a significant factor in ensuring the safety of patient management in the perioperative period.

This document should be considered in conjunction with the Australian and New Zealand College of Anaesthetists' Professional Document PS7, "The Preanaesthesia Consultation". Document PS7 refers to the content and conduct of the preanaesthesia consultation, and supports the need for appropriate physical facilities.

The following facilities are considered to be a minimum standard when assessing the suitability of a particular location for the preanaesthesia assessment of patients before general or major regional anaesthesia.

#### **General**

The location(s) of the consultation room(s) may be within the treatment facility or entirely separate.

A separate room should be available to undertake the pre-anaesthesia consultation. This room should have a door and any windows must be provided with blinds or other window coverings.

Where the consultation is to be undertaken in an in-patient ward, the ability to draw curtains around the patient's bed will substitute for the requirement of a separate consultation room. The room should be well illuminated.

#### **Privacy**

The consultation must be able to be conducted in privacy, with due regard for medical needs, and cultural and religious sensitivities.

#### **Seating Accommodation**

There must be adequate seating accommodation for the anaesthetist, the patient and an accompanying family member or carer.

#### **Handwashing Facilities**

Handwashing and hand disinfection facilities must be readily available.

#### **Equipment**

The following equipment should be provided in each consultation room:

1. A bed or couch for the purposes of examination.
2. Patient gowns.
3. Stethoscope.
4. Sphygmomanometer or automatic blood pressure measuring device.
5. Disposable gloves.

The following equipment should be readily available:

1. Thermometer.
2. Torch and tongue depressors.
3. Scales.
4. X-ray viewing box.

The following equipment may be considered:

1. Finger prick blood testing strips.
2. Haemoglobinometer.
3. Pulse oximeter.
4. Twelve lead ECG.
5. Spirometer.

### **Changing Room and Toilet Facilities**

There must be ready access to a changing room and toilet facilities.

There may be a requirement for security facilities for patient valuables.

(Note: These are not required where the anaesthesia consultation room is separate to the treatment facility.)

### **Reception**

There must be a staffed reception area where preliminary documentation and booking procedures may be undertaken. Telephone and facsimile and photocopying facilities must be available.

There should be appropriate stationery required by the anaesthetist, such as a preanaesthetic or anaesthetic chart and blood test/ECG request forms.

### **Staffing**

At least one additional staff member is required to undertake secretarial and nursing duties, including acting as a patient chaperone when required.

### **References**

ANZCA Professional Document PS7 “The Preanaesthesia Consultation” Australian and New Zealand College of Anaesthetists, Melbourne, 2008.

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