

LETTER TO THE EDITOR

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Who performs the preoperative examination?

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Keywords: Local anesthesia, Perioperative management team, Preoperative examination

To the editor

Anesthesiologists generally perform preoperative examinations of patients undergoing anesthesia that will be managed by those anesthesiologists; however, anesthesiologists have not been paying attention to other cases. Hereby, we present a recently experienced case. A 55-year-old male (168 cm, 62 kg) with severe renal dysfunction underwent reinsertion of a dialysis catheter under local anesthesia using 1% lidocaine in the operation room in the daytime. For the case, the anesthesiologist was not involved in. After complaining severe pain during surgery, the patient suffered a cardiac arrest suddenly. We performed cardiopulmonary resuscitation following an emergency call. Since cardiopulmonary resuscitation was unsuccessful, we suspected aortic dissection. We inserted a probe, performed transesophageal echocardiography, and were able to diagnose an aortic dissection. Cardiopulmonary bypass surgery was performed, and the patient's aneurysm was repaired with a synthetic graft. The patient was discharged 1 month later without complications. If we had examined the chest computer tomography images taken 1 year, we would have seen thoracic aortic aneurysms that were 5.0 cm in size.

This case prompted us to raise the question "Who should perform preoperative examinations of patients undergoing surgery under local anesthesia when anesthesiologists are not involved in?" Although the best answer is that anesthesiologists should perform preoperative examination in all cases, that is impossible from a manpower standpoint. The Japanese Society of Anesthesiologists established a certification system for perioperative management teams in 2014 [1, 2]. Following the case described above, our hospital began using Perioperative Management Teams, comprising certified medical staff members, to conduct

preoperative examinations of all patients undergoing surgery under local anesthesia. A current limitation of this process is that the preoperative examination protocol of this process is unclear.

Informed consent for publication of this case has been obtained from the patient.

Funding
None.

Authors' contributions

HU and HO did the Study design/planning. Data analysis is not applicable. HU wrote the paper. HU and HO revised the paper. Both authors read and approved the final manuscript.

Ethics approval and consent to participate
Not applicable.

Consent for publication

The patient granted consent for publication.

Competing interests

The authors declare that they have no competing interests.

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Springer Nature remains neutral with regard to jurisdictional claims in published maps and institutional affiliations.

Received: 11 January 2018 Accepted: 21 February 2018

Published online: 24 February 2018

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