JANDEE
ANESTHESIOLOGY, PLLC
Ambulatory Anesthesia For A New Millennium

CONSENT FOR PAIN MANAGEMENT

I authorize and direct **Michael Song, M.D. (**anesthesiologist & pain management specialist) and his/her associates of **Jandee Anesthesiology,** to provide pain management and or anesthesiology for me including the performance of any additional procedures that in his/her judgment may be advisable and medically necessary for my well being.

Pain management involves the use of medications and procedures. Anesthetic medications, if necessary, may on occasion, cause unusual or unexpected reactions in some patients. In addition, one's physical condition or health may influence the actions of anesthesia medications. Anesthetic procedures are often necessary to provide you with a safer anesthetic and recovery from surgery. Examples or anesthetic procedures include placing catheters into arteries and veins or placing tubes/probes down the esophagus. These additional procedures allow for more intensive monitoring of your vital functions and are intended to provide your anesthesiologist with as much information as necessary to provide you with sound medical care. All reasonable precautions will be taken; however, unforeseen reactions or complications can occur.

I understand and accept that certain hazards and risks, though uncommon, are inherent with pain management and or anesthesiology services. Post anesthetic nausea and vomiting, headache, phlebitis, recall of sound/noise/speech by others, sore throat and injury to mouth/lips/vocal cords /eyes are examples of some potential complications. Even though steps are taken to protect teeth/dentures/bridgework there is no guarantee against accidental damage, even for normal teeth.

Anesthesia may also result in more serious heart, lung, nerve, or muscle dysfunction. Although very rare, there is always a remote risk of paralysis, brain damage, heart attack, or death with the administration of anesthetics.

Regional anesthetics such as spinals, epidurals, and nerve blocks can have other potential complications such as backaches, headaches, bleeding, infection and/or nerve injuries. Nerve injuries can result in persistent pain, numbness and/or weakness.

There is no guarantee against the development of complications with the administration of any type of anesthesia or the performance of anesthetic procedures.

I understand that conditions may develop that may require a change in the type of anesthesia initially decided upon by me and my anesthesiologist and that additional procedures may become necessary during the course of an anesthetic. I therefore authorize, in advance, modifications or extension of this consent as medical judgment may indicate.

The nature of the proposed anesthesiology services and available alternatives has been explained to me. No warranty or guarantee has been given to me. I have had the opportunity to ask questions and my questions have been answered to my satisfaction, I, therefore, consent for anesthesiology services.

I authorize Jandee Anesthesiology, PLLC to submit the bill for services rendered to me on this date. I hereby assign directly to Jandee Anesthesiology, PLLC all payments for anesthesia services rendered. If necessary, I hereby authorize Anesthesia Business Consultants on my behalf, to appeal the bill for services rendered to me on this date.

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Signature Patient/Parent/Guardian Date/Time

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Signature Witness Date/Time

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Physician's Signature Date/Time