



# Patient Satisfaction Scoring After Pre Anesthesia Evaluation

**P. Jeffrin Reneus Paul <sup>a\*</sup> and Henry Prabhu Alfred <sup>a</sup>**

<sup>a</sup> *Saveetha Medical College and Hospitals, India.*

## **Authors' contributions**

*This work was carried out in collaboration between both authors. Both authors read and approved the final manuscript.*

## **Article Information**

DOI: 10.9734/JPRI/2021/v33i60B34948

## **Open Peer Review History:**

This journal follows the Advanced Open Peer Review policy. Identity of the Reviewers, Editor(s) and additional Reviewers, peer review comments, different versions of the manuscript, comments of the editors, etc are available here: <https://www.sdiarticle5.com/review-history/75177>

**Original Research Article**

**Received 23 October 2021**  
**Accepted 25 December 2021**  
**Published 27 December 2021**

## **ABSTRACT**

**Background:** Evaluation of patient satisfaction after pre anesthesia has become an important part in the improvement of anesthesia services. This can also be used for the improvement of staff-patient relationship. This study is done to know about the satisfactory condition of the patient after pre anesthesia. The satisfactory tool we use are the same for both adult and paediatric age group since only few paediatric patients were included in the study.

**Methods:** This study is a research, conducted on one hundred and twenty patients who undergone several surgeries at Saveetha Hospitals in Chennai, Tamil Nadu, India between January and March of 2021. Patients were asked several questions 24 h in the post-op section using a pre anesthesia Patient Satisfaction questionnaire. Based on their responses the data was collected to analyse the level of satisfaction of the patient.

**Results:** The overall satisfaction score was found to be 68.8%. Percentage of satisfactory patients who were found to be less feared and concerned is 87.5%. Percentage of patients with whom the doctor maintained a good relationship with is 75%. 82% Patients were found to be happy with the amount information provided to them about the procedure. In elective situations the patient satisfaction was at a higher level.

**Conclusion:** The satisfaction level among the patients were moderate. Patients described the staff-patient relationship was very satisfactory. They also described low fear and concern regarding anesthesia. The study also emphasised that the information regarding the anesthesia to the patients were satisfactory overall. The study was approved by the authors institution.

**Keywords:** Anesthetist visit; pre-anesthesia; patient satisfaction.

## 1. INTRODUCTION

Whenever a patient presents to anesthesia during surgery evaluating his satisfaction is a critical component in the improvement of Anesthesia service quality. The presence of a preoperative anaesthetist can have a considerable impact on this [1-5].

Before a surgery visit of an anesthetist is a critical component of anaesthetic care. In choosing the type of anaesthetic, it's helpful to get to know the patient's general health status and the nature or type of the surgery. This allows patients to meet the anaesthetist, learn about anaesthesia alternatives, and discuss the complications and management options. Additionally, assessing the preoperative condition decreases the anxiousness of the patient and also helps the anesthetist and surgeons to perform surgery without any hesitation, improves the patient's their hospital stay, and the pre evaluation also reduces complication rates and mortality [6-10].

The anesthetists have clearly mentioned about the complications and the patients were able to as any doubts or questions to the anesthetists and the anesthetists too cleared them their doubts with great explanation.

In terms of obtaining consent, a preoperative examination is equally critical. 8–10 Anesthesia services should be as complete as possible, even if they range from different countries around the world. The hospital's anaesthetic service begins the night before surgery with a preoperative evaluation of patients in the corresponding ward. These are done to assess the patient's condition and to know about the status of his health, to make the patient know about the risk factors and anesthesia techniques and make them comfortable. The day case surgery patients are assessed some days back to the and an another re-evaluation is done on the day of the procedure for these patients. The main aim of our study is to know about the satisfactory level of the patient after the pre anesthesia evaluation with also the relationship of the patient with the doctor. Both general and regional anesthesia are being used in our study.

Our study is purely based on the satisfactory level of the patient and not the preoperative care because patients were evaluated based on the

anesthesia and the behaviour of the anesthetists and not on preoperative care.

## 2. METHODS

### 2.1 Study Design and Period

This study was designed to determine the satisfaction of the patient after pre anesthesia evaluation. The study was conducted at the Department of Anaesthesia in Saveetha Hospitals in University of saveetha from January 15 to March 15, 2021.

### 2.2 Study Subjects

All the patients who were about to undergo surgery under anesthesia during our study period were included. Patients who were discharged before 24 hours after surgery are excluded from data collection. The female patients included were not pregnant.

## 3. RESULTS

Our study period included a whole of 140 patients who underwent surgery upon anesthesia. Of these, 20 patients were excluded from the study as they got discharged earlier than 24 hours after operation. Our study grasped a response rate of 88.9% from a total of 120 patients. There were patients with a maximum age of 80 years and minimum age of 12 years. The mean age was 39.70 years.

22 anesthetists took part in our study for anesthesia services.

**Table 1. Participants Sociodemographic characteristics**

Factor	Frequencies	Percentage
Sex		
Male	45	58.33%
Female	75	41.66%
Age		
≤18years	9	2.5
19 – 29 years	19	15.8
30 – 49years	29	24
50 – 65 years	28	23
>65 years	35	29.7

Nearly 85(70.8%) patients got to know about the anesthetists since they introduced themselves and 33 (32.4%) patients had an idea about the anesthesia type and 21 (20.6%) patients heard

about the possible complications occurring post operatively.

Anesthetists visiting the patients in the preoperative section during January 15 to March 15, 2021 (N=120).

About 85(70.8%) patients getting to spend adequate time with anesthetist and 74 (61.6%) patients doubts were clarified adequately during the preoperative evaluation and 69(57.5%) patients were feeling less anxious after anaesthetists visit. (Table 3).

#### 4. DISCUSSION

An anesthetist's preoperative assessment of a surgical patient is a crucial interaction between the patient and the anaesthetist [11]. The examination enables the anaesthetist to accurately analyse the patient's overall health status and also their medical condition and evaluate the same, identify anesthesia-related risk factors, educate the patient regarding anesthesia techniques and postoperative care choices, and gain consent.

During the preoperative evaluation, the patient can learn about the planned anaesthetic as well as any potential issues that may emerge during the perioperative phase. Problems discovered during this diagnostic process may be resolved prior to the surgery, or postponement of surgery is advised. All of these procedures can increase anaesthetic safety, which helps surgical patients have a better outcome. Patient satisfaction is seen as a key indication of health-care quality.

The preoperative anaesthetist visit was found to be unsatisfactory by this clinical audit. This could be due to a lack of knowledge regarding anaesthetic alternatives, potential side effects, and problems, as well as how to deal with perioperative issues. Lack of information regarding the experienced or trained anesthetist and their role in managing the patient during and after the operation may also be a factor for dissatisfaction. Despite the fact that each and every patients were visited by anaesthetists during the preoperative evaluation of the patient, few anxiety reduction techniques were used , as evidenced by the information provided in the areas of anaesthetists' self-introductions; the adequacy of the anaesthetists' time spent with the patients; the adequacy of the anaesthetists' responses to patients' questions; and reduction of the anaesthetists' responses to patients.

**Table 2. Visit of anesthetists with the patients in the pre-operative section during, Jan 15 – Mar 15, 2021(N=120)**

Factor	Frequency	Percentage
Anestheist visited the patient		
Yes	120	100
No	0	0
Patient got to know about the anesthetist		
Yes	85	70.8
No	35	29.2
History taking was alone		
Yes	120	100
No	0	0

**Table 3. Preoperative visit of Patients with anesthetists, Jan 15 – Mar 15, 2021 (N=120)**

Factor	Frequency	Percentage
Patient getting adequate time with Anesthetist		
Yes	85	20.8
No	35	29.2
Patient's doubts were clarified adequately		
Yes	74	61.6
No	46	38.4
Patients feeling less anxious after anesthetists visit		
Yes	69	52.5
No	51	42.5

(Tables 2 and 3). One of the most common causes in the dissatisfactory condition in patients undergoing surgery is preoperative anxiety, which is reflected in this study. This anxiety may be caused due to the lack of knowledge about the surgery or anesthesia by the patients since the anesthetist didn't provide adequate information regarding them.

The fact that only less percentage of patients (33 [32.4 percent] were informed about the type of anaesthetic used in this study may have resulted in high levels of anxiousness , which may have lead to dissatisfaction in many patients .

The quantity of information provided about possible postoperative problems and treatment alternatives, as well as patients other doubts were clarified adequately (Table 2). Usually the patients presents with fear due to anaesthesia, surgery, complications occurring post operatively, are all well-known reasons of major dissatisfactory situations in patients undergoing elective surgery.

#### 5. CONCLUSION

Overall, low patient satisfaction with pre anesthesia was found (64.7%) in department of

anesthesia in savee tha hospital. The visit of anesthetist before the operation, procedure explanation and general physical examination and other procedures were almost in accordance with other top hospitals and were upto standards. The anesthetists also spent adequate time with the patients. The main issues with the anesthetists' is introduction of himself to the patient ; information provision regarding type of anesthesia, complications developing after the operation ,management; the way how anesthetists' clarifies the patients' doubts; making the patient comfortable and reassuring the patient.

## CONSENT

As per international standard or university standard, patient's written consent has been collected and preserved by the author(s).

## ETHICAL APPROVAL

As per international standard or university standard written ethical approval has been collected and preserved by the author(s).

## COMPETING INTERESTS

Authors have declared that no competing interests exist.

## REFERENCES

1. Saal D, Heidegger T, Nuebling M, Germann R. Does a postoperative visit increase patient satisfaction with anaesthesia care? Br J Anaesth. 2011;107(5):703–709.
2. Le May S, Hardy JF, Taillefer MC, Dupuis G. Patient satisfaction with anesthesia services. Can J Anaesth. 2001;48(2):153–161.
3. Kouki P, Matsota P, Christodoulaki K, et al. Greek surgical patients' satisfaction related to perioperative anesthetic services in an academic institute. Patient Prefer Adherence. 2012;6:569–578.
4. Cooray TC. Audit to evaluate the patients view, regarding the preop- erative visit of the patients by the anaesthetist. Sri Lankan Journal of Anaesthesiology. 2011; 19(1):39–42.
5. Pre-Operative Assessment and Preparation. The Role of the Anaesthetist. AAGBI; 2010. Available: <http://www.aagbi.org/sites/default/files/preoperativeass01.pdf>. Accessed September 4, 2014.
6. Consent for Anaesthesia. AAGBI; 2006. Available: <http://www.aagbi.org/sites/default/files/consent06.pdf>. Accessed September 4, 2014.
7. Vyhunthan G, Aeshana de Silva NG. Audit to evaluate preoperative visit to patient by anaesthetist. Sri Lankan Journal of Anaesthesiology. 2012;20(2):88–91.
8. Kloub R, Al-Qudah N. Analysis of patients' anesthesia experience at the Royal Jordanian rehabilitation center: a survey of anesthetic practice. JRMS. 2004;11(1):59–62.
9. Hepner LD, Bader MA, Hurwitz S, Gustafson M, Tsen CL. Patient satisfaction with preoperative assessment in a preoperative assessment testing clinic. Anesth Analg. 2004;98:1099–1105.
10. Lee A, Lum ME. Measuring anaesthetic outcomes. Anaesth Intensive Care. 1996; 24(6):685–693
11. Hemmanur S, Nasim I. "Randomized clinical trial of anesthetic efficacy of buffered versus conventional local anesthetic agent in patient with symptomatic irreversible pulpitis". Journal of Pharmaceutical Research International. 2020;32(17)1:-10. DOI: 10.9734/jpri/2020/v32i1730662.

© 2021 Paul and Alfred; This is an Open Access article distributed under the terms of the Creative Commons Attribution License (<http://creativecommons.org/licenses/by/4.0>), which permits unrestricted use, distribution, and reproduction in any medium, provided the original work is properly cited.

Peer-review history:

The peer review history for this paper can be accessed here:  
<https://www.sdiarticle5.com/review-history/75177>