**Subjective items to be considered in lipoabdominoplasty patients under high level epidural anesthesia (patient report patient)**

**Aim and Background**

Recently, recording of patient satisfaction has been considered by the medical community as an important parameter in the analysis of administered health care services. It is considered to be decisive for two reasons: first, it may enable the tracing and correction of health care system impotencies and problems; and second, this approach can meet patients’ desires and expectations, resolve their speculations, and consequently, increase their trust and cooperation in the national health care system policy and practice. Factors affecting satisfaction are under investigation throughout the world. Thus far, several validated studies in different ethnicities have been performed regarding anesthesia services. The aim of this study was to evaluate satisfaction in patients that did lipoabdomenoplasty under combined lumbar spinal-epidural anesthesia (CLSEA ) regarding many things that suspected to happening intraoperative and determine which factors maximize satisfaction level through all phases of the perioperative period. A secondary aim was to search for dissatisfaction points that would decrease the efficiency in our above procedure. This is the first study, to our knowledge, that measures patient satisfaction in this type of surgery and anesthesia.

**Materials and methods**

All adult patients who underwent lipoabdomenoplasty under CLSEA with no any intraoperative or postoperative complications during a two years period in Jian Private Hospital were included in this prospective observational study. Exclusion criteria were as follows: patient refusal, cognitive dysfunction or any other inability to fill the questionnaires on one’s own and any surgical or anesthetic complications that happened intraoperatively or postoperatively.

**Questionnaire development**

We performed a cross-sectional survey using single-item questions that concerned patient satisfaction with intraoperative period. According to the existing literature, five basic sections should be investigated: the amount of information given; participation in decision making; the level of physical comfort and presence of side effects; the presence of emotional support; and the respect of patient values. All the above factors were included in the attached questionnaire. Also all the included patients have to get this questionnaire and if do have to answer all the questions

**Data collection**

In all cases, a preanesthetic visit to the candidate of lipoabdomenoplasty was performed by the anesthetist and the surgeon who would participate in the operation. During this visit, baseline characteristics were recorded in a separate leaflet: age, sex, American Society of Anesthesiologists classification, marital status, educational level, comorbidities, and prior psychiatric history.

Questionnaires were distributed the morning after the operation. Patients had to complete the questionnaires on their own. Only a patient admission code number had to be recorded in all leaflets so that collected information from different documents could be matched at the end.

**Statistical analysis**

In all the questionnaires, inter-item, item-dimension, and interdimension correlations (Pearson’s r) should assess. Principal component analysis with varimax rotation on the correlation matrix should also perform separately for each questionnaire in order to assess distinct dimensions and the extracted factors entered into multiple logistic regression models with patient satisfaction as the dependent binary variable. Statistical significance level was set at *P* < 0.05. Data analysis should perform with SPSS 13.0 (IBM Corporation, Armonk, NY).

The satisfaction questionnaire for patients underwent lipoabdomenoplasty under combined lumbar spinal-epidural anesthesia

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| --- | --- | --- |
|  | Questions  | Answer |
|  | Is it a good type of anesthesia? |  |
|  | Did you annoyed by noise and voice in operation theatre? |  |
|  | Did you feel pain intraoperatively? |  |
|  | If the above is yes. How many times? |  |
|  | Did you have dyspnea intraoperatively? |  |
|  | Did you have shivering intraoperatively? |  |
|  | Did you feel cold intraoperatively? |  |
|  | Did you have nausea intraoperatively? |  |
|  | Did you vomit intraoperatively? |  |
|  | Did you have pruritus intraoperatively? |  |
|  | Did you feel thirsty intraoperatively?  |  |
|  | Did you have dizziness intraoperatively? |  |
|  | Did you have any stress intraoperatively?  |  |
|  | Did you feel secure intraoperatively?  |  |
|  | Did you disturbed by intense light? |  |
|  | Did you disturbed by delay procedure? |  |
|  | Did you disturbed by your stay in fixed position? |  |
|  | Did you feel anxious during surgery? |  |
|  | Did the operation theatre team discuss medical subjects, ignoring your presence? |  |
|  | Did the operation theatre team deal with you with respect and dignity? |  |
|  | Did the operation theatre team provide enough information about medications and their adverse effects? |  |
|  | Did find the results of this surgery as before described by team?  |  |
|  | Should you undergo the same operation once again, would you rather have the same anesthetic procedure? |  |