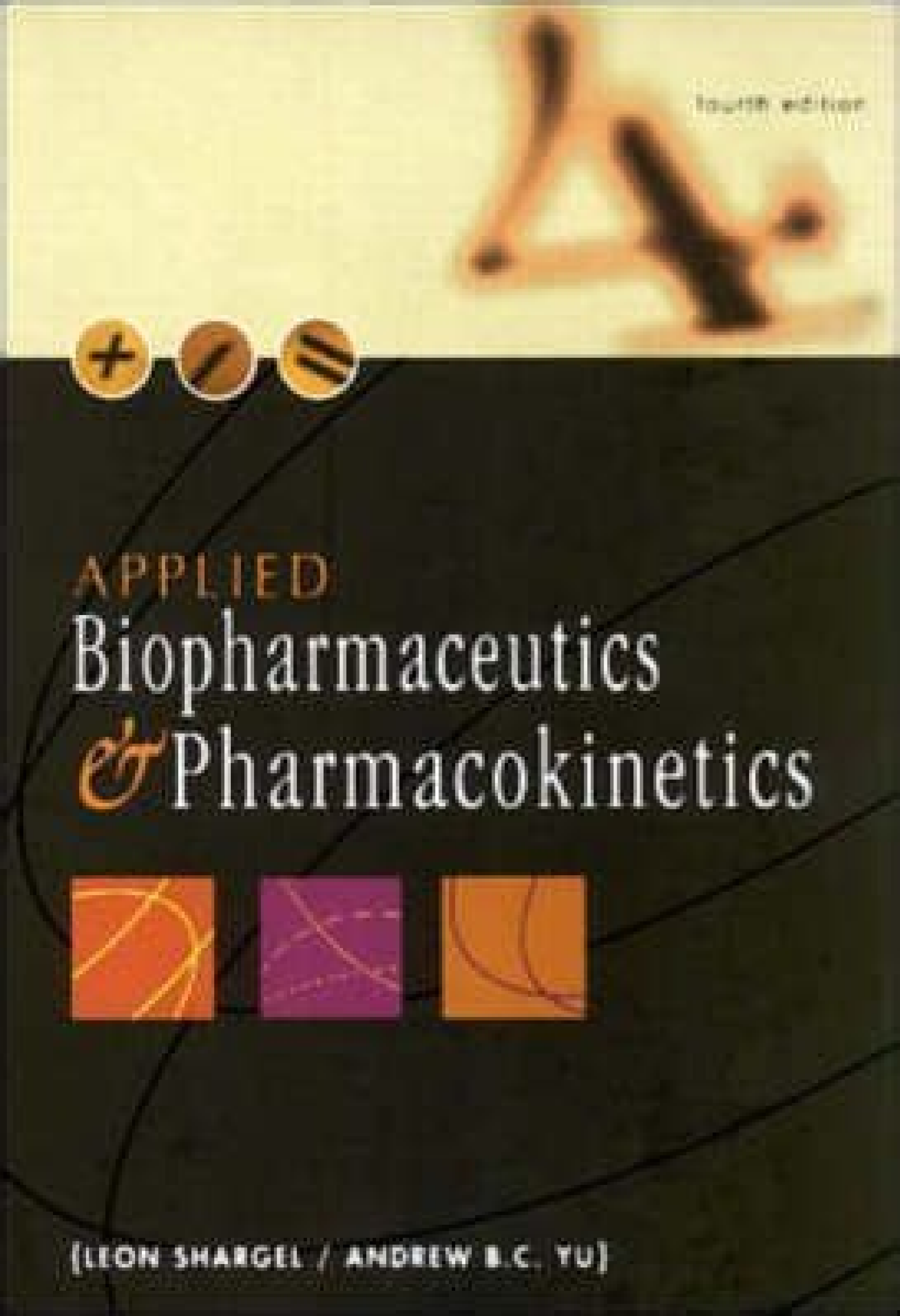


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A short-term non-barbituric anaesthetic used for short procedures that induces a dissociated state where the patient is unconscious (but may seem awake) and does not feel pain. This dissociative anesthesia provides sedation, amnesia, and immobility. It interacts with the N-methyl-D-aspartate receptor and stimulates the central sympathetic outflow, which in turn causes heart stimulation with increased blood pressure and CO₂. Beneficial in patients with hypovolemic or cardiogenic shock and in patients with asthma. Not used in hypertensive patients or stroke. Causes post-operative hallucinations. Stage III Surgical anesthesia: Loss of muscle tone and reflexes. Ideal stage for surgery. Requires careful monitoring. Paralysis: Medullary Stage IV: Severe depression of respiratory and vasomotor centers. Death may occur unless breathing and circulation are maintained. Not irritating and a powerful analgesic but a weak general anesthetic. Nitrous oxide is often used at concentrations of 30-50% in combination with oxygen for analgesia, especially in dental surgery. Serves to calm the patient, relieve pain, and protect against undesirable effects of anesthetics or Anticholinergics. Anticholinergics such as glycopyrrolate (Prevent bradycardia and liquid secretion). Propofol, Fospropofol, Barbiturates, Benzodiazepines, Opioids, Ketamine, Local anesthetics. Local anesthetics: Onset 2-4 min, duration 1-2 hours. Opioids: Ketamine, Nitrous oxide. Nitrous oxide is a potent anesthetic and analgesic. It is used in combination with oxygen for analgesia and sedation. It is also used in combination with general anesthetics. Nitrous oxide is contraindicated in patients with certain cardiovascular and respiratory conditions. General anesthesia: Loss of consciousness, loss of reflexes, and loss of protective reflexes. It is induced by various drugs, including propofol, etomidate, and benzodiazepines. General anesthesia is used for major surgery. Sedation: A state of reduced consciousness and awareness. It is used for minor procedures and pain management. Sedation is induced by drugs such as benzodiazepines and opioids. Conscious sedation: The patient is conscious but relaxed and does not feel pain. It is used for dental procedures and minor surgery. Deep sedation: The patient is in a state of deep unconsciousness but can be awakened. It is used for major surgery. General anesthesia: The patient is completely unconscious and does not feel pain. It is used for major surgery. The response and perception of external stimuli for patients subjected to surgical procedures and other medical procedures provide these benefits: 1. Induction: The time period from the beginning of the administration of powerful anesthetic to the development of effective surgical anesthesia in the patient. 2. Maintenance: The time period during which the patient remains in a state of surgical anesthesia. 3. Emergence: The time period from the cessation of the anesthetic to the return of consciousness. 4. Recovery: The time period from the cessation of the anesthetic to the return of normal physiological functions. 5. Complications: Unfavorable reactions to the anesthetic, such as hypotension, respiratory depression, and allergic reactions. 6. Contraindications: Conditions that make the use of an anesthetic dangerous or impossible. 7. Pre-anesthetic testing: Evaluation of the patient's health status before surgery. 8. Monitoring: Continuous observation of the patient's vital signs during anesthesia. 9. Resuscitation: Restoration of consciousness and normal physiological functions in the event of a complication. 10. Patient safety: Ensuring that the patient remains stable and comfortable throughout the procedure. 11. Pain management: Providing effective pain relief during and after surgery. 12. Sedation: Reducing anxiety and discomfort. 13. Amnesia: Preventing the patient from remembering the procedure. 14. Immobility: Keeping the patient still during surgery. 15. Hemodynamic stability: Maintaining blood pressure and heart rate. 16. Respiratory stability: Maintaining adequate ventilation and oxygenation. 17. Cardiovascular stability: Maintaining adequate cardiac output and blood flow. 18. Neurological stability: Maintaining normal brain function. 19. Hemostasis: Preventing excessive bleeding. 20. Temperature regulation: Maintaining normal body temperature. 21. Acid-base balance: Maintaining normal pH. 22. Electrolyte balance: Maintaining normal levels of sodium, potassium, and calcium. 23. Renal function: Preventing kidney damage. 24. Hepatic function: Preventing liver damage. 25. Immune response: Preventing infection. 26. Coagulation: Preventing excessive bleeding. 27. Cellular metabolism: Maintaining normal cellular function. 28. Overall patient care: Providing the best possible outcome for the patient.

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