

Type of procedure	Pelvic exenteration – anterior and total hysterectomy ± cystectomy ± rectal amputation
Airway	Intubation
Anesthesia model	Sevoflurane / Fentanyl
Epi / Spinal	Epi (Th10–12) or spinal with morphine; bilateral rectus sheath catheters or PCA
Premedication	Paracetamol + COX inhibitor + Betamethasone + Ondansetron + Postafen 25 mg or Lergigan 25 mg + Gabapentin 600 mg
Tips for the anesthesiologist	Major surgery: fluid shifts, bleeding risk, postoperative pain management and VTE prophylaxis.
Recommended vascular access	Peripheral IV ×2 (≥18G) + arterial line. Central venous catheter recommended.