

P.O. Box 5010 800 Commissioners Road East London, Ontario N6A 5W9

Telephone: 519-685-8434



Patient & Family Information

Learning
About
General Anesthesia

No Eating or Drinking Guidelines Prior to the Procedure (Newborn to 17 Years of Age)

Can my child have anything to eat or drink before the procedure?

Until midnight the night before the procedure, your child may have a regular diet. A regular diet is food and fluids your child normally eats or drinks, unless directed otherwise by your child's nurse or doctor.

After midnight guidelines about eating and drinking must be followed. The guidelines are for the safety of your child. Your child's procedure will be delayed or cancelled if you do not follow the guidelines.

• After midnight the day of the procedure, your child should have nothing to eat or drink by mouth or by tube feed except for clear liquids.

Clear fluids are water, apple juice, sugar water, popsicles, carbonated pop, clear broth, (consommé), Jell-o, tea or coffee without cream or milk.

- If bottle or breast-fed, your baby or young child may have breast milk or formula up to 6 hours before arrival.
- Your child may have clear fluids to drink up to 3 hours before arrival.
- Your child must not drink anything, not even clear fluids or water, 3 hours before **arrival**.

Your child will require anesthetic for his/her upcoming procedure. This brochure will tell you what to expect with anesthetic and learn about how you can support your child.

What is General Anesthesia?

General Anesthesia is a medicine given to your child to help him/her fall asleep. When your child is sleeping, he/she will not feel, hear, or see during the procedure.

The medical doctor who is responsible for giving your child the sleeping medicine is called an anesthesiologist. He/she will stay with your child during the entire procedure.

The sleeping medicine can be given by inhalation using a soft, plastic face mask or by injection through an intravenous (IV). The anesthesiologist will choose the one that is best for your child on the day of the procedure. Often other anesthetic agents are added.

The mask will be placed over your child's mouth and nose, and is also used for administration of oxygen. This medicine travels through a long tube attached to the end of the mask. Your child can help by taking some deep breaths into the mask.

The IV is a way to get medicine (and fluids) into your child's body. The IV tube will be placed in a vein, usually in the hand, using a needle. Once the tiny tube is in place, the needle is removed from your child's vein.

Every child experiences the direct effects of anesthesia differently. It is natural for children to have a short period of excitement or movement. It is also normal with anesthesia for children to become relaxed or even limp when they completely lose consciousness. However, your child will fall asleep quickly after the anesthetic has been given to him/her.

Once your child is asleep, the anesthesiologist may insert a tube in your child's windpipe to help him/her breathe. The anesthesiologist will remove this tube as soon as your child wakes up after the completion of the procedure. He/she will not feel or remember having this tube removed, but may experience a sore throat when he/she wakes from the procedure.

What can you expect as a parent/caregiver?

Children's Hospital at London Health Sciences Centre accepts the request of a parent/caregiver to be present at the start of his/her child's anaesthesia induction in the procedure room for children who are between the ages of 2 and 8 years and for parents/caregivers who are healthy, have a calming influence on his/her child and are comfortable with his/her prospective role in the procedure room.

From time to time, under special circumstances and in the best judgment of the anesthesia team, you may not be able to stay with your child during the sedation period. Though the chances of this are low; the decision will be made in the best interest of the child and for his/her safety and well-being.

Here are a few tips to help you support and comfort your child on the day of the procedure:

• Be open and honest with your child about what to expect (e.g., describe what he/she will see, hear and feel).

- Plan to bring another adult with you on the day of your child's procedure to help with your travel home.
- Children and youth are able to sense your emotions. Be aware of your own emotional and physical state and know your limitations.
- Pre-anesthesia instructions regarding medications and eating/drinking will be shared with you by your child's nurse or doctor.
- Ensure your child leaves all metal items at home (e.g., jewelry).
- Your child may wish to bring a familiar item (e.g., stuffed animal, blanket) from home into the procedure room, as it can provide reassurance and emotional support for him/her.
- When you accompany your child into the procedure room, you will be able to wear your street clothes.
- When you and your child enter the room, a health care professional will help you comfortably position yourself next to your child's bed.
- You may find that a soothing, comforting touch and voice helps your child when going asleep.
- You will continue to comfort and support your child in the procedure room until the child is asleep, or is at the point where he/she is no longer aware of your presence.
- You must leave the procedure room when requested to do so by the anaesthesiologist or doctor.
- Once your child is asleep, a nurse or patient service associate will escort you to the waiting room.
- Once your child is awake after the procedure, a nurse or volunteer will get you from the waiting room so that you can support your child during the recovery process at the hospital and later at home.