

# Your child's general anaesthetic

#### Other formats

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This booklet explains what to expect when your child comes into hospital to have an operation or investigation under a general anaesthetic.

You can watch a video of what it's like to go to hospital and have an anaesthetic at www.apagbi.org.uk/children-and-young-people/videos-children

There is also an app you can download on your iPhone, iPad or Android devices that has a virtual tour of the hospital and further information on the day. This is called Little Journey and is available at <a href="https://appurl.io/qOo56bvfx">https://appurl.io/qOo56bvfx</a>

## What is a general anaesthetic?

A general anaesthetic ensures that your child is unconscious and free of pain during an investigation, procedure or operation.

Anaesthetists are specialist doctors who are responsible for the wellbeing of your child throughout surgery. Anaesthetists are also closely involved with your child's pain relief after surgery.

### What happens on the day of the procedure?

Nothing to eat and drink - fasting ("nil by mouth")

### Morning admission (if we ask you to attend at 7.30am)

Your child needs to have been fasting from midnight. Please do not let your child have any milk, fizzy drinks, juice or solid food. Please give your child a drink of water or squash before arriving at 7.30am. It is important to give them this drink to prevent them from becoming too thirsty or dehydrated.

Please make sure that your child does not chew gum or suck sweets as this increases gastric juices caused by chewing.

#### Afternoon admission (if we ask you to attend at 12.30pm)

Your child needs to have been fasting from 7.00am. Please give your child a light breakfast to be finished by 7.00am. Encourage them to drink water or a weak squash until 12.30pm. It is important that they have clear drinks until this time to prevent them from becoming too thirsty or dehydrating.

Babies under a year old should be breast fed until 4.30am for a 7.30am admission, and until 9.30am for a 12.30pm admission. Please offer them water after this until you arrive at hospital.

Your child will be offered some water or squash on arrival at the Day Surgery Unit and depending on the time of the procedure, may be offered further drinks.

#### The pre-operative visit

An anaesthetist will usually visit you on the ward before the procedure to discuss your child's anaesthetic. The anaesthetist will ask you about your child's general health, and will discuss with you and your child how he or she will go to sleep ("be anaesthetised"). The anaesthetist will also discuss the type of pain relief to be used during and after the procedure.

For practical reasons, occasionally the anaesthetist who sees you on the ward might not be the same one who gives your child's anaesthetic, but the information you give them will be diligently passed on.

### Delaying the operation or investigation

Occasionally the anaesthetist may learn something about your child that means it would be safer not to do the procedure on that day.

This could happen if your child has a bad cold or has a rash.

## Premedication (a "premed")

Premedication is the name for medicines given before an anaesthetic. Some premeds help your child to relax, and some are related to the kind of surgery he or she will be having.

Not every child needs a premed.

If your child needs a premed, it will usually be given as a liquid to drink, or as a cream on the skin. Very occasionally an injection may be needed.

Types of premeds which might be given:

- 'Magic cream' is a local anaesthetic cream, that is put on the hand or arm before an
  injection, so it doesn't hurt. It works well for 9 out of 10 children. This cream is also
  called Ametop or EMLA.
- Pain relieving drugs such as paracetamol that can also help during and after the operation.
- Medicines to protect your child from side effects of the anaesthetic (for example, feeling sick)

- Sedatives to ease your child's anxiety
- An extra dose of your child's usual medication, for example for asthma.

## Going to theatre

Your child can wear his or her own clothes, or he or she can wear a hospital gown. Your child will be able to keep underwear on, unless this underwear has metal clips or fastenings. Depending on the procedure, clothing may be removed when your child is asleep. Loose-fitting clothing work best. Unfortunately clothes can get stained during the operation and therefore please try and avoid lightly coloured clothing if at all possible.

You can accompany your child to the anaesthetic room, along with a ward nurse who will take you back to the ward when your child is asleep. If you prefer not to accompany your child, a nurse from the ward will accompany him or her. Don't be afraid to let the ward nurse know.

Your child will either have an anaesthetic gas to breathe or medicine through a small plastic tube (cannula). It might be possible to do this with your child sitting on your knee. Some children prefer gas, and some prefer medicine. If both methods are safe for your child, you and your child might be able to choose which is used. Sometimes it can be difficult, or even impossible, to get a cannula in the right place and then gas will be used.

If medicine is used, the magic cream is removed, and a cannula is placed in a vein (usually on hand or arm). When the medicine is injected through the cannula, your child will usually become unconscious very quickly indeed. Some parents can find this experience quite frightening.

If anaesthetic gas is used, it will take a little while for your child to be anaesthetised, and he or she might become restless while the gas takes effect. The gas is administered through a face mask, or by the anaesthetist cupping a hand over your child's nose and mouth. When your child is asleep, a cannula will be inserted for safety, and to administer painkillers or other medicines if necessary during procedure.

The cannula will stay in until after the operation. When we are sure your child does not need any more medicine through it, the ward nurse will remove it.

## What happens next?

Your child will be taken into the operating theatre to have the operation, procedure or investigation.

The anaesthetist will be with your child throughout the entire operation, carefully monitoring his or her condition, and making sure that he or she is safe. Anaesthetic gases and/or medicines will be used to keep your child anaesthetised.

### After surgery and recovery?

Most children will go to the recovery room.

Each child is cared for by a specialist nurse until he or she is awake, and is ready to go back to the ward.

Usually a ward nurse will bring you to the recovery room, as soon as your child wakes up.

Some children are very distressed when they wake from the anaesthetic. This is common in children under 3 years and sometimes in children who were upset before they were anaesthetised. It is not related to pain. Your child may take a little while to calm down, but will usually settle after returning to the ward, having food and drink, and playing with their toys or watching TV.

#### Pain relief

Pain relieving medicines are given during the anaesthetic to ensure that your child is as comfortable as possible after surgery. The type and strength of pain relief given will depend on the procedure. To try to avoid injections, sometimes pain killers may be given as suppositories.

The team will discuss with you the kind of pain relief your child will get during and after the operation.

### Going home

Most children have their operations and investigations done as day cases, and go home later on the same day. Please make sure you have painkillers at home for your child. As long as your child is back to normal and eating and drinking, he or she will be allowed home about 2 hours after returning to the ward. The time will be longer for some operations.

Occasionally children may feel sick or even vomit after they have left hospital, especially during the car journey home.

Before you leave, you will be told who to contact if you have any concerns about your child when you get home. This could be the ward you were on, the Emergency Department or your GP. If you don't know who to contact, please ask.

Your child should not have a bath or shower for 24 hours after the procedure due to the possible side effects of having an anaesthetic, such as nausea and dizziness.

## What are the risks of having a general anaesthetic?

Modern anaesthesia is very safe, and we expect your child to make a full recovery. However, general anaesthetics have some risks, which may be increased if your child has any chronic medical conditions. In general they are as follows:

- Common temporary side-effects (risk between 1 in 10 and 1 in 100) include bruising or pain in the area of injections, blurred vision and sickness. These can usually be treated and pass off quickly.
- Infrequent complications (risk between 1 in 100 and 1 in 10,000) include temporary breathing difficulties, muscle pains, headaches, damage to teeth, lip or tongue, sore throat and temporary problems speaking
- Extremely rare and serious complications (risk of less than 1 in 10,000). These
  include severe allergic reactions and death, brain damage, kidney and liver failure,
  lung damage, permanent nerve or blood vessel damage, deep vein thrombosis, eye
  injury, and damage to the voice-box. These are very rare and may depend on
  whether your child has other serious medical conditions.

#### **Further information**

**Day Surgery Unit** 

Tel: 01271 322 455

**Caroline Thorpe Ward** 

Tel: 01271 322704

#### **PALS**

The Patient Advice and Liaison Service (PALS) ensures that the NHS listens to patients, relatives, carers and friends, answers questions and resolves concerns as quickly as possible. If you have a query or concern call 01271 314090 or email ndht.pals@nhs.net. You can also visit the PALS and Information Centre in person at North Devon District Hospital, Barnstaple.

#### Have your say

Northern Devon Healthcare NHS Trust aims to provide high quality services. However, please tell us when something could be improved. If you have a comment or compliment about a service or treatment, please raise your comments with a member of staff or the PALS team in the first instance.

'Care Opinion' comments forms are on all wards or online at www.careopinion.org.uk.

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