

# Your Child's Anaesthetic

**This leaflet gives basic information to help you and your child prepare for their anaesthetic. If you have any further questions, please speak to a doctor or nurse caring for you.**

## Type of anaesthesia

General anaesthesia is when drugs are used to make your child unconscious so that they can't hear or feel anything. Local anaesthetic may also be used with or occasionally instead of general anaesthesia to numb a part of the body so that no pain is felt.

## Anaesthetists

Anaesthetists are doctors with specialist training. You will meet an anaesthetist before the operation to discuss the anaesthetic and you will have the opportunity to ask questions.

## Before the anaesthetic

An anaesthetist will ask questions about your child's health and medication. They will discuss the type of anaesthesia which can be used and decide with you what is best for your child. Your child may have a cream which numbs the skin placed on the back of their hands in order to place a cannula, which is a thin plastic tube, into a vein. There may be a period of waiting prior to the operation so you should bring something for your child to do. Occasionally your child will receive premedication (known as a "premed") which is an oral medicine to relieve anxiety before the operation. Following Trust policy, if your daughter is of childbearing age, she will have a urinary pregnancy test preoperatively. Occasionally it is necessary to postpone your child's operation which could

happen if your child is unwell or has eaten food too recently. If you are concerned that your child may be too unwell for surgery, please telephone the ward prior to leaving home.

## **Fasting**

It is important that you follow hospital guidelines on fasting:

- **Six hours** before the operation your child may have a light meal or a milky drink.
- **Four hours** before the operation your baby may drink breast milk.
- **One hour** before the operation your child may drink water or fruit squash (not fruit juice or fizzy drinks).

Please encourage your child to drink water or squash up to an hour before their operation so that they don't get thirsty and grumpy.

## **Having the anaesthetic**

You and your child will be accompanied from the ward to the anaesthetic room.

Your child can take a toy or comforter and it may be possible to give the anaesthetic while your child sits on your lap.

The anaesthetist will start the anaesthetic by injecting the anaesthetic medicine through the cannula or by giving your child anaesthetic gas to breathe. The gas may be given by a mask or by the anaesthetist cupping their hand over your child's nose and mouth. If gas is used your child may become restless before they are unconscious. The injection works very quickly. When your child is asleep you will be accompanied back to the ward and an anaesthetist will remain with your child all the time. At the end of the operation your child will be taken to the recovery room. In the recovery room a member of

the theatre team stays with your child. You will be called to be with your child when they are awake.

### **Pain relief**

Pain relief is important. The anaesthetist will manage your child's pain during and immediately after the operation. This is done in many ways. Common medicines are paracetamol (Calpol) and ibuprofen (Nurofen). It is important to give pain medicine regularly so please make sure you have a stock of these at home. For bigger operations a strong pain killer such as morphine may be needed.

Local anaesthetic is used during the operation to numb a particular part of the body. A common technique is a caudal epidural anaesthetic, often used for operations below the navel (tummy button) and this is performed when your child is asleep. This will provide excellent pain relief for three to four hours. Your child may have weak legs and may find it difficult to pass urine for the first few hours.

Your child may be tearful after the operation. They may feel tired and should be encouraged to sleep. Most children are allowed a drink soon after their operation.

### **Going home**

Most children will have their operation and go home later the same day. Your child may experience some discomfort and should take pain relieving medicine as instructed by the hospital. Some children do not sleep well after their operation, they may be more clingy but this behaviour should quickly return to normal. If you have any concerns, you should telephone the number provided by the ward.

## Risks

Serious problems during and after anaesthesia are uncommon. However, risks cannot be removed completely. Common side effects include a sore throat, feeling sick and dizzy and shivering. Rare side effects such as developing a serious reaction to the anaesthetic may occur in one child in 20,000. The side effects depend upon the type of surgery and anaesthetic.

## Useful sources of information

Please access the link below to see a short video with your child on what to expect on the day:

[Preparing for paediatric surgery at St George's University Hospital, London - YouTube](#)



Please scan this QR code and watch this video

Please also visit this link to the Royal College of Anaesthetists website which provides a comprehensive guide to general anaesthesia for children:

[Information for children, parents and carers | The Royal College of Anaesthetists \(rcoa.ac.uk\)](#)

Common events and risks and for children and young adults having a general anaesthetic:

[Child-Infographics\\_2022.pdf \(rcoa.ac.uk\)](#)

## Contact us

If you have any questions or concerns, please contact the paediatric wards:

Jungle	020 8725 2034
Nicholls	020 8725 2098
Frederick Hewitt	020 8725 2081
Pinckney	020 8725 2082

**For more information leaflets on conditions, procedures, treatments and services offered at our hospitals, please visit [www.stgeorges.nhs.uk](http://www.stgeorges.nhs.uk)**

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## Additional services

### Patient Advice and Liaison Service (PALS)

PALS can offer you on-the-spot advice and information when you have comments or concerns about our services or the care you have received. You can visit the PALS office between 9.30am and 4.30pm, Monday to Friday in the main corridor between Grosvenor and Lanesborough wings (near the lift foyer).

**Tel:** 020 8725 2453 **Email:** [pals@stgeorges.nhs.uk](mailto:pals@stgeorges.nhs.uk)

### NHS Choices

NHS Choices provides online information and guidance on all aspects of health and healthcare, to help you make decisions about your health. **Web:** [www.nhs.uk](http://www.nhs.uk)

## NHS 111

You can call 111 when you need medical help fast but it's not a 999 emergency. NHS 111 is available 24 hours a day, 365 days a year. Calls are free from landlines and mobile phones.

**Tel:** 111

## AccessAble

You can download accessibility guides for all our services by searching 'St George's Hospital' on the AccessAble website ([www.accessable.co.uk](http://www.accessable.co.uk)). The guides are designed to ensure everyone – including those with accessibility needs – can access our hospital and community sites with confidence.



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