

→ Anesthesia for your child undergoing ENT surgery

It can be stressful for parents when their child is to undergo surgery, and many are understandably worried about anaesthesia. However, as long as guidelines are followed and your child is in the care of an experienced paediatric anaesthetist, anaesthesia for healthy children is extremely safe. Children generally tolerate anaesthesia very well and usually make a rapid recovery.



Anxiety

The operating room is unfamiliar, and can make children anxious. Younger children can benefit from mild sedatives taken by mouth, but remember your child will be calmer if you are calm. Australia is the safest country in the world to undergo surgery and anaesthesia, and you are in safe experienced hands. Please feel free to ask questions so you feel fully informed about the choice to proceed with surgery.

Fasting

All children undergoing surgery **MUST "fast"** before anaesthesia (that is, limit food and liquid intake for a period of time beforehand).

Children should have no solid foods, milk or non-clear liquids for at least six hours before surgery. They can have breast milk until four hours before surgery, and very specific clear fluids such as water or apple juice up to two hours before surgery.

This is very **important** to prevent **complications**. If these guidelines are not followed, food or liquids in the stomach can enter the lungs and cause dangerous problems with breathing. Please be very careful to follow these guidelines.

Illnesses

All children undergoing anaesthesia for planned surgery should be well. Children who have significant illnesses (particularly those that lead them to stay in bed, be off their food, or have high fevers, or a frequent moist cough) may be at increased risk of complications and the procedure may need to be postponed on the day of surgery.

Anaesthesia

If your child is under ten, typically I will provide "inhalation anaesthesia" - this is a mixture of "laughing gas" and other gases that are given through a mask. They are sweet smelling and not unpleasant, and children typically fall asleep within 30-60 seconds.

Whilst talking to your children ahead of time about this helps, as do sedating medications, a small number of children do cry a little when going to sleep this way. Rest assured it is not painful or unpleasant.

During the final phases of "falling asleep", children typically wriggle and move their arms and legs a little, and they may make snoring noises or roll their eyes. This is normal and expected, and is due to the effects of the gases, not distress or discomfort. Once your child is asleep, someone will show you from the operating room, and a drip will be placed to give fluids, pain medicines and other medicines as required for the particular surgery your child is undergoing.

Recovery

Most children wake up quickly after general anaesthesia. This is also sometimes associated with short-term disorientation and agitation that can be disconcerting to parents. However, it is reassuring to know that this is common and not of any concern, is not usually due to pain, resolves quickly and in general children have no memory of this once they have fully recovered.

As soon as your child regains consciousness, one parent (or guardian) will always be encouraged to enter the Recovery Room to help comfort your child.

Minor complications such as nausea, vomiting or pain are not uncommon, and managed with medications in the recovery room.

Following surgery, your child will often (but not always) require pain relief. Please see the attached sheet for further information on this.

I look forward to meeting you on the day of surgery and providing the best of care for your child.

Dr Chris Jones