

Anaesthesia for Your Child – Advice for Parents & Carers

Children's Services
Women & Children's Services

This leaflet has been designed to give you important information about your condition / procedure, and to answer some common queries that you may have.



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Introduction

The aim of this leaflet is to provide you as carers or parents all the relevant information regarding anaesthesia for your child and answer some of the common concerns and queries.

What is Anaesthesia?

The word 'anaesthesia' means 'loss of sensation'.

General Anaesthesia is a state of controlled unconsciousness during which your child feels nothing and may be described as "anaesthetised". Controlled unconsciousness is different from unconsciousness due to injury or disease and is different from sleep. As the anaesthetic drugs wear off, consciousness returns.

Benefits:

- If your child is very anxious or worried it is the best option as they are unconscious during the operation
- Some operations can only be done under general anaesthetic

Alternatives

In many cases there is no alternative to having a general anaesthetic due to the nature of the surgery. It may be possible to perform a small number of procedures with just local anaesthetic (numbing), or sedation only.

The Anaesthetist

Anaesthetists are highly trained doctors, who have had specialist training in anaesthesia, in the treatment of pain, in the care of the

critically ill (intensive care), and in emergency care (resuscitation).

The Anaesthetist is responsible for:

- The wellbeing and safety of your child throughout surgery
- Making sure that the child is asleep and has no pain during surgery
- Management of pain after surgery

Meeting the Anaesthetists

The anaesthetist will make every effort to meet you and your child on the ward, before your child is taken to the operating theatre.

You will have the opportunity to ask / discuss / request anything regarding the anaesthetic your child would be receiving.

If the anaesthetist doesn't visit your child on the ward, you will be given the opportunity to ask questions when you arrive in theatre.

What the Anaesthetist would like to know about your child:

- Your child's medical problems
- Any medication your child is taking
- Any known allergies
- Any problems with previous anaesthetics experienced by your child, a sibling or parents
- If they have any loose teeth
- For adolescent girls we may ask them or you (with their consent) about their menstrual cycle and the date of their last period or if they are taking oral contraceptives, this is to reduce the risks of anaesthesia and surgery. They may also be asked to give a sample of urine



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for pregnancy testing. Please do not be offended by this

There are different ways of giving anaesthetic:

- Anaesthetic drugs may be injected through a vein. In this case your child might receive a local anaesthetic cream (“magic cream”) which will be put on the back of his / her hand or wherever the cannula is to be placed. A cannula is a thin plastic tube that is placed into a vein. A needle is used to put a cannula in but this is removed immediately and the thin plastic tube secured. This will allow the injection to be done with little or no pain
- Alternatively, a child might be given anaesthetic gases mixed with ‘fresh air’ to breathe through a mask, which is gently put on the face, covering the mouth and nose. Anaesthetic gases smell similar to felt tip pens
- In some instances the anaesthetist may consider injecting a local anaesthetic in the area to be operated on to reduce the need for strong pain relief during and after the operation (this will be done when your child is asleep). This may be referred to by such terms as ‘block’ or ‘infiltration’. Sometimes an anaesthetist may decide to inject local anaesthetic directly into the spine, which is called epidural or spinal. The anaesthetist will discuss this with you if necessary

It is often possible for you and your child to choose how the anaesthetic and other medicines are given

Sometimes there are medical reasons why things have to be done in a certain way. These will be explained to you. Nothing will

happen unless you understand and agree with what has been planned. Your wishes and those of your child are very important. We want to work with you to provide the best possible care for your child and family.

Nothing to eat or drink - fasting (nil by mouth)

You will receive instructions separately about when your child should stop eating and drinking, taking into account the expected time of their operation.

It is very important that you follow these instructions. If there is any food or liquid in your child’s stomach during the anaesthetic, it could come up into the back of the throat and then go into the lungs with a risk of damage to the lungs.

Premedication (a premed)

This is the name for drugs which are sometimes given before an anaesthetic. Not every child needs a premed. It is usually a pain relief, sedative to calm a very anxious child or the child’s regular medication.

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. The anaesthetist will discuss the reason with you.

What happens after the operation or investigation?

Your child will be taken to the recovery room where a nurse will monitor them until they start to wake up. You may be able to go to the recovery room as soon as your child starts becoming conscious. If you have any



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concerns about your child in recovery please talk to your nurse.

Recovering on the ward:

- Your child will have been given pain relief in theatre but may require more pain relief on the ward. Your nurse will ensure that your child is as pain free as possible
- Some children do feel nauseous or are sick
- Your nurse will let you know when your child is ready to go home. Some children will be booked as day cases and so stay only a few hours after the operation. Some will stay overnight. You should know before admission how long your child may stay in hospital

Risks

For a child in good health having minor surgery:

- 1 child in 10 might experience a headache, sore throat, sickness, dizziness, itching, blurred vision, pain during injection of drugs, bruising and soreness
- 1 child in 1000 may experience complication such as a chest infection, bladder problems, muscle pains, slow breathing, damage to teeth, lips or tongue and worsening of an existing medical condition
- 1 child in 10,000 or 1 child in 100,000 may develop serious complications such as a serious allergy to the drugs, damage to the eyes, nerve damage, equipment failures and death
- Deaths caused by anaesthesia are very rare, and are usually caused by a

combination of 4 or 5 complications together. There are probably about 5 deaths in every million anaesthetics in the UK per year

Additional Information

Further information for parents, carers and children is available at the website of the Association of Paediatric Anaesthetists of Great Britain and Ireland:

www.apagbi.org.uk

The leaflets for children “Rees Bear has an anaesthetic”, “Davy the Detective finding about anaesthetic” and “General anaesthetic A brief guide for young people” have information in a child friendly format. If you do not have internet access but wishes to have hard copies of these leaflets, please contact the Pre-assessment Nurse.

Short videos to introduce you and your child to the Children’s wards in our hospital are available at:

<http://www.nlg.nhs.uk/>

Children’s Services – SGH (Scunthorpe) and Children’s Services – DPOW (Grimsby). The video “Children’s Services – DPOW” also includes brief introduction about what happens with your child in theatre.

References

No references.



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Contact details for Further Information

If you require any further information please do not hesitate to contact the Pre Assessment Nurse:

Diana Princess of Wales Hospital:
01472 874111 extension 1129

Scunthorpe General Hospital:
01724 387979

Concerns and Queries

If you have any concerns / queries about any of the services offered by the Trust, in the first instance, please speak to the person providing your care.

For Diana, Princess of Wales Hospital

Alternatively you can contact the Patient Advice and Liaison Service (PALS) on (01472) 875403 or at the PALS office which is situated near the main entrance.

For Scunthorpe General Hospital

Alternatively you can contact the Patient Advice and Liaison Service (PALS) on (01724) 290132 or at the PALS office which is situated on C Floor.

Alternatively you can email:
nlq-tr.PALS@nhs.net

Northern Lincolnshire and Goole NHS Foundation Trust

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Grimsby
01472 874111

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Date of issue: June, 2015

Review Period: June, 2018

Author: Operational Matron for Children's Services

IFP-512 v1.1

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