

Anesthesiologie / Kindergeneeskunde / Dagverpleging

## Kind en anesthesie - Informatie over narcose en zaken rondom een operatie

Vertaling in het Engels

### Children and Anaesthesia

Information on Anaesthesia and Surgery

#### Important information

##### Fasting

Before a surgical procedure under regional or general anaesthesia, your child must have an **empty stomach**.

##### This means:

- **Your child may not eat anything from 6 hours before you report to the hospital.**
  - If your child is bottle-fed, you may continue to bottle-feed until **6 hours before you report to the hospital**.
  - If your child is breastfed, you may continue to breastfeed until **4 hours before you report to the hospital** (breast milk is better tolerated and passes more quickly through the stomach).
- **Your child may drink** half a glass of water or clear sugary liquid such as sugar water, lemonade, ice lollies and clear apple juice **until 1 hour before you report to the hospital.**  
**No dairy products.**
- **After this, your child may not eat or drink anything.**
- **If your child smokes, they may not smoke after midnight.**

**Please note: if your child is admitted the day before the procedure, your child does not need to fast before coming to the hospital.**



*(For further details, see the section 'Admission day')*

## **Introduction**

You have agreed with the doctor in charge that your child will soon undergo surgery or a procedure. This will take place under some form of anaesthesia. Your child will need to be admitted to the Paediatrics Department (Venlo) or Short Stay Department (Venray) for a few hours to days.

Your doctor has already given you information about the procedure. For children, knowing what to expect is important. Preparation and predictability are important. Children of different ages may have their own interpretation of what to expect. Their expectations do not always match reality.

This information can help you prepare your child well. It includes information about anaesthesia and what happens in the paediatric ward.

## **Rights of minors**

The rights and obligations of children change as the child gets older.

### ***For children under 12 years***

the parents or guardian represent the child and give their consent to a medical procedure. However, the child should be involved in these events as much as possible. Besides informing the parents, the healthcare provider also informs the child as clearly as possible, taking the child's age into account. For children from 12 to 16 years

the rule applies that both the parents/guardian and the child are entitled to understandable information and that both must consent to the treatment. Sometimes only the child's consent is enough.

This may be so in the following cases:

- if the medical treatment is necessary to prevent serious harm to the child;
- if the child persists while the parents disagree;
- if it is clear that the child has given careful thought to the treatment and the consequences, the child's consent may be sufficient.

### ***For children from 16 years***

parental consent is no longer required. The child decides and is also informed. Also, only the child may view their record. If the parents want to see the record, they must have their child's permission to do so.

## **Anaesthesia**

### **What is anaesthesia?**

Anaesthesia is the medical word for sedation and is an induced state of controlled, temporary loss of sensation (numbness). The anaesthesiologist is the medical specialist who makes sure that anaesthesia goes as well and safely as possible. All children undergoing surgery must be screened by the anaesthesiologist beforehand.

### **Types of anaesthesia**

There are different kinds of anaesthesia:

- General anaesthesia (narcosis)
- Regional anaesthesia
- Sedation

### **Local anaesthesia**

- General anaesthesia is usually given to (young) children. Your child may be put to sleep with a mask (anaesthetic gases) or an injection into the hand or arm (drip). The medication given is tailored exactly to your child and the circumstances.

## **Pre-operative office**

Preparing children as thoroughly and safely as possible for anaesthesia is important. That is why we carry out the pre-operative assessment. For this, you and your child will have an appointment at the pre-operative office. The pre-operative assessment minimises the risk of problems during and after surgery.

- You will be given a questionnaire to complete. The preoperative nurse will discuss the list with you. Sometimes your child will undergo a physical examination.
- The anaesthesiologist will talk to you about the best form of anaesthesia to use, the pros and cons and the preparations that will be needed. For example: how long your child must fast for and the medicines they must take on this day. If your child always takes medication (e.g. inhaler), discuss with the anaesthesiologist whether these should also be used on the day of surgery.

During the procedure, a different anaesthesiologist may administer the anaesthesia than the one you spoke with previously. This anaesthesiologist will know what has been discussed and be aware of all the details.

## **Preparation at home**

Visit the VieCuri Paediatric Ward's website [www.viecuri.nl/kids](http://www.viecuri.nl/kids). It has several videos you can watch with your child as preparation; so you both know what to expect.

It is important to prepare your child thoroughly for the surgery. Your child's age and character will determine what you tell them and how. Carefully consider what your child needs and when you will prepare them before the surgery. Be honest and keep your explanation simple.

The medical details are of no use to young children in particular; they can cause unnecessary anxiety. As well as watching the video, you should tell your child why they are having surgery, what they may feel and that you, as parents, will stay with them as much as possible. Make it clear that it is only a temporary stay.

If your child needs more explanation and wants to see more materials, you can make an appointment with the paediatric ward's medical teaching assistant.

Available at +31 (0) 77 320 58 30

## **Childhood illnesses**

Contact the outpatient clinic of the doctor operating on your child as soon as possible if your child has the following symptoms:

- fever
- coughing with mucous
- not feeling well
- sores
- pimples
- inflammations

Also, contact us if your child has had any vaccinations (immunisations) in the last 2 weeks or has been in contact with other children who have had a childhood illness in the last 3 weeks.

It may be better to postpone the surgery until your child is better.

## **Presence of parents**

Having you present makes your child feel safe. It is best if you are present all day.

**What to bring and what to consider?** Pack some things with your child the day before the surgery, such as:

- pyjamas (preferably not new ones);
- slippers;
- underwear;
- cuddly toy or doll;
- hospital card;
- a drinking cup or bottle

Leave jewellery such as rings, earrings and necklaces at home. Remove any piercings, make-up and nail polish at home. Your child must not wear clips or rubber bands with metal in their hair.

## Admission day

### Fasting before a surgery or procedure

For surgery under regional or general anaesthesia, your child must have an **empty stomach on the day of the procedure.**

### Fasting means:

- **Your child may not eat anything from 6 hours before you report to the hospital.**
  - If your child is bottle-fed, you may continue to bottle-feed until **6 hours before you report to the hospital.**
  - If your child is breastfed, you may continue to breastfeed until **4 hours before you report to the hospital** (breast milk is better tolerated and passes more quickly through the stomach).
- **Your child may drink** half a glass of water or clear sugary liquid such as sugar water, lemonade, ice lollies and clear apple juice **until 1 hour before you report to the hospital. No dairy products.**
- **After this, your child may not eat or drink anything.**

### Examples:

- *If your child is expected at the hospital at 7:00 am, they may not eat anything after 1:00 am the night before. No more bottle-feeding either. Your child may drink half a glass of water or a clear sugary liquid between 1:00 am and 6:00 am. After this, your child may not eat or drink anything. If your child is breastfed, you may breastfeed until 3:00 am.*
- *If your child is expected at the hospital at 11:00 am, they may not eat anything after 5:00 am that morning. No more bottle-feeding either. Your child may drink half a glass of water or a clear sugary liquid between 5:00 am and 10:00 am. After this, your child may not eat or drink anything. If your child is breastfed, you may breastfeed until 7:00 am.*

If your child does eat or drink anything after these times, you must report it. The surgery may not be able to proceed.

**Eating or drinking after the times specified above can be dangerous because the stomach contents may flow into the lungs while under anaesthesia. This can be life-threatening.**

### For the parent accompanying the child

We advise you to eat breakfast. Supervising and supporting your child takes extra effort. Especially if you stay at the hospital all day. It is also a good idea to bring a sandwich for yourself. And perhaps something to read or something to pass the time while you wait. The ward has a coffee machine you can use free of charge. You can buy something to eat from the restaurant on the ground floor.

### Procedure on the ward

On the day of the surgery, your child is expected on the ward at the agreed time. A maximum of 2 adults (**no children**) may accompany the child. A nurse will take you and your child to the room. There, you will find a bed and clothes for your child to wear during the surgery.

### The surgery/anaesthesia

When it is time, a nurse will take you and your child to the operating theatre. **If the mother is pregnant, please discuss this at the preoperative screening with the anaesthesiologist.** You may be asked to put on special clothing. During the start of general anaesthesia, **one** of the parents may stay with the child until they are asleep.

When your child is lying on the operating table, a mask will be fitted over their nose and mouth.

They have to breathe calmly into this. It will smell a little strange. After a short time, your child will fall asleep. Sometimes, instead of the mask, your child may be given a drip to help them fall asleep. A thin needle is used to insert the drip.

It comes out after insertion. The thin plastic tube remains in the blood vessel. The sleep medicine is administered through the drip.

You can reassure your child by stroking them, holding their hands or talking to them. Your child will hear a familiar voice when they go to sleep. Your child may become restless as the anaesthesia starts to work. This is normal.

Once your child is asleep, a member of staff will ask you to leave the operating theatre. Your child may still have their eyes half open or be moving a little. But they are still fast asleep and will not know that you are leaving.

### **After surgery**

After surgery, your child will be taken to the recovery room. A staff member from the Paediatric Department will then take one of the parents to the recovery room. This may mean that your child is awake before you arrive. When your child has recovered sufficiently, they may return to the ward.

### **Side effects and complications**

Anaesthesia is safe. Nevertheless, complications or side effects may occur, such as pain, vomiting, allergic reactions to medicines, damage to teeth and (temporary) nerve damage.

Your child may have a heavy or itchy feeling at the back of the throat from the tube that was inserted during surgery to help them breathe. This irritation will go away on its own after a few days.

Many children are thirsty after surgery. When your child is allowed a drink, take it slow. If your child is not allowed to drink, you can wet their lips to relieve the worst thirst. The nurses know exactly what to give your child. Feel free to ask about this at any time.

### **Going home**

When your child can go home depends on the surgery or procedure. This may be in the course of the day, or your child may have to stay at the hospital longer. You will be informed about this in advance.

On the way home, it is useful to have a separate driver as well as an accompanying parent. Any follow-up treatment and aftercare depend on the surgery. You will receive information about this from the doctor or nurse on the ward.

### **Home again**

During the day, your child will be allowed to eat some easily digestible food, in small quantities, unless something else has been agreed upon. The anaesthetic may cause your child to be drowsy. Do not let your child climb stairs or ride a bicycle alone to avoid falling. It is quite normal for your child to feel unwell for a while after the surgery.

Hospitalisation and surgery are major events. Some children are frightened by the procedure and everything related to it. Children may regress in their development. They may show age-inappropriate behaviour, such as bedwetting. They may also be more affectionate or react dismissively. Emotions are often expressed towards parents. Accept this and don't pay too much attention to it. It will pass on its own.

## **Pain relief**

Pain after surgery can be a sign that something is wrong, but it can also adversely affect getting better. For example, pain can restrict your child from breathing deeply and coughing or even force them to lie still.

To treat pain, paracetamol is always given first. If this does not work for your child, we will discuss which new pain medication your child needs.

We will also check whether your child can breathe, cough and move with the pain at that moment.

Pain treatment may also be needed after discharge from the hospital. Get paracetamol for children in case it is needed.

## ***Paracetamol suppositories/melting tablets***

You can use melting tablets from 15 kg.

<b>Child's weight</b>	<b>Suppository/melting tab. ON surgery day</b>	<b>Suppository/melting tab. AFTER surgery day</b>
3 kg	2x per day 60 mg	3x per day 60 mg
4 kg	2x per day 60 mg	3x per day 60 mg
5 kg	2x per day 120 mg	3x per day 120 mg
6 kg	2x per day 180 mg (120 + 60)	3x per day 180 mg (120 + 60)
7 kg	2x per day 180 mg (120 + 60)	3x per day 180 mg (120 + 60)
8 kg	2x per day 240 mg	3x per day 240 mg
9 kg	2x per day 240 mg	3x per day 240 mg
10 kg	2x per day 240 mg	3x per day 240 mg
11-14 kg	2x per day 240 mg	4x per day 240 mg
15-19 kg	3x per day 240/250 mg*	4x per day 240/250 mg*
20-24 kg	3x per day 240/250 mg*	3x per day 500 mg
25-29 kg	2x per day 500 mg	4x per day 500 mg
30-34 kg	3x per day 500 mg	4x per day 500 mg
> 35 kg	2x per day 1000 mg	3x per day 1000 mg

\*the suppository contains 240 mg, the melting tablet 250 mg

***Ibuprofen liquid (nurofen)***

<b>Child's weight</b>	<b>Dosage</b>	<b>ml per dose</b>
6 kg	3x per day 60 mg	3 ml
7 kg	3x per day 70 mg	3.5 ml
8 kg	3x per day 80 mg	4 ml
8 kg	3x per day 90 mg	4.5 ml
10-14 kg	3x per day 100 mg	5 ml
15-19 kg	3x per day 150 mg	7.5 ml
20-24 kg	3x per day 200 mg	10 ml
25-29 kg	3x per day 250 mg	12.5 ml
30-34 kg	3x per day 300 mg	15 ml
35-39 kg	3x per day 350 mg	17.5 ml
> 40 kg	3x per day 400 mg	1 tablet/20 ml

**Questions or complaints after the surgery or procedure?**

Please contact the outpatient clinic of the doctor in charge if any problems occur after 24 hours.

Outside office hours, you should contact the Emergency Department in Venlo • +31 (0)77- 320 58 10.

Always state what surgery your child has had when contacting the hospital.



## Questions

If you have any questions after reading this information, please inquire about them during your next visit or contact the:

- **Venlo location**  
**Paediatrics Department**  
route number 32 (low 3)  
• +31 (0) 77 320 58 30  
*on workdays: 8:00 - 16:30*
- **Venray Location Short Stay Department**  
route number 84 / low 3  
• +31 (0) 478 52 21 30

Pre-operative Office		
<b>Venlo location</b>	routing number 17	• +31 (0) 77 320 52 11
<b>Venray location</b>	routing number 40	• +31 (0) 478 52 26 10

## VieCuri Medisch Centrum

### Locatie Venlo

Tegelseweg 210  
5912 BL Venlo  
☎ (077) 320 55 55

### Locatie Venray

Merseloseweg 130  
5801 CE Venray  
☎ (0478) 52 22 22

Meer informatie [www.viecuri.nl](http://www.viecuri.nl)

Bekijk uw medische gegevens op [www.mijnviecuri.nl](http://www.mijnviecuri.nl)