



What Parents Should Know Before Their Child Has Surgery

By Paul Yost, MD

Whether it's a special test like an MRI, inserting tubes to minimize ear infections, or a more serious surgery, there are a variety of situations where a child may need anesthesia. These times can be scary for parents as well as the child. But, having an experienced team of doctors who are familiar with pediatric surgery can help calm everyone's fears.

A pediatric anesthesiologist will help set the tone for the whole experience by smoothly putting your child to sleep, carefully monitoring all of his vital functions, and making sure your child's pain is controlled with the right approach when he wakes up. Below are answers to common questions and some tips for parents when their child has to have surgery.

Should I Cancel If My Child has a Cold?

In the past, children with colds typically had their surgery postponed until they felt better. This was based on concerns that the child's cold increased the risk of complications during surgery. Today, doctors know more about the effect of colds on anesthesia and feel that it is generally safe to do a minor procedure that doesn't involve the airway if a child is not wheezing and does not have a productive cough nor a high fever.

Young children frequently have mild coughs and colds, especially during the winter months, so it may not be practical to postpone surgery until their upper respiratory symptoms completely clear. It's best to consult with your child's surgeon and pediatric anesthesiologist, but canceling surgery for a child that has a common cold may not be necessary.

Can My Child Eat Before Surgery?

It is important that all patients—including children—minimize their risks by avoiding food or drinks before surgery. Anesthesia is much safer when the patient's stomach is empty as it significantly lowers the risk of anything moving from the stomach into the lungs.

You should check with your child's doctor to see what she recommends, but frequently used guidelines are as follows:

- Light meal, milk and formula: wait 6 hours
- Breast milk (infants): wait 4 hours
- Clear liquids: wait 2 hours

How Can I Prepare My Child for Surgery?

It's quite common for children and their parents to be anxious about surgery. Before the big day, you should meet with your child's physician to ask questions and alleviate concerns. This can help

you stay calm and confident on the day of surgery, which in turn helps manage your child's level of fear.

There are different techniques for preparing children for surgery based on their age and maturity level. For children under six years old, physicians typically use friendly distraction and oral or nasal spray medications to help provide sedation and a smooth induction of anesthesia (when a child goes to sleep for surgery).

Patients over the age of six can often benefit from feeling involved and informed, so doctors can describe what they're doing and give the children choices such as how they would like to go to sleep for surgery. Allowing older children to discuss what's about to happen with their pediatric anesthesiologist can help ease fears and give them a sense of ownership and control over the process.

What Can I Do to Reduce My Child's Risk?

Be sure to share all of the background information about your child's health, including any prescribed and over-the-counter medications your child is taking, with the pediatric anesthesiologist prior to the procedure. This will allow the pediatric anesthesiologist to determine
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which type of anesthesia is safest. And, remember to follow the guidelines limiting eating and drinking before the operation.

Can Parents Go Into the Pre-op or Operating Room?

Some facilities allow parents to be present during induction of anesthesia (as their child goes to sleep). Having a parent present, however, has been shown to help the induction of anesthesia only if the parents themselves have a calm disposition and can focus on distracting the child. Children are very adept at picking up stress levels from their parents.

If the parent can be calm, and most of all distracting, for their child, then parental presence can help. Most pediatric surgical facilities have trained staff that can entertain your child with video games, iPads, movies, and

distracting toys that will help with the induction. The surgical staff and pediatric anesthesiologist may feel more comfortable with all of their attention focused on the child rather than on a parent in the operating room as well.

Will Any Special Precautions be Needed After my Child is Sent Home?

Depending on the medication used, your child may be sleepy and unsteady on her feet for a few hours after the procedure. Be observant and stay with your child for 12-24 hours after anesthesia until parents are sure the child is stable on her feet.

It is also important for parents to manage their child's post-operative pain effectively by following the directions for pain medication as prescribed by the doctor. Contrary to what some

parents might think, it is extremely unlikely that a child will become addicted or overdose if the pain medication is administered properly and is only taken for a short period of time.

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