Your child is due to be admitted to the Children’s Hospital in the morning for their procedure. During the procedure your child will be having either a general anaesthetic or sedation. It is important that these instructions are followed for their safety. If they have anything in their stomach whilst they are under anaesthetic or sedation, it might come back up and get into their lungs.

If these instructions are not followed, this may result in your child’s procedure being cancelled.

PREPARING FOR YOUR CHILD’S ADMISSION

FOOD
Your child can eat their usual diet up until 2.30am (approximately 6 hours before the start time of the list for surgery (as they could be first on the list)).

Your child should then stop eating food. This includes milk or drinks with milk in them, milk substitutes (e.g. soya), fruit juices with bits, and any snacks such as biscuits, crisps, chewy or boiled sweets and mints.

Your child can have a snack and/or drink before they go to bed. If they wake up during the night they can have a light snack, such as a biscuit or a piece of fruit, before 2.30am, unless you have been told there is a medical or procedural reason which means that they shouldn’t. This is important, as it will help prevent their blood glucose from becoming too low, which can be dangerous, as it may be some time before they are able to eat again.

Then they should NOT eat anything else, but should continue to drink clear fluids until 7.30am.

If you have been given specific dietary advice (such as bowel preparation), please follow the instructions you will have been given.

INFANT FEEDS (breast milk or formula milk)
Infants under 1 year of age
- Can drink cow’s milk up to 2.30am.
- Can drink formula milk up to 4.30am.
- Can have breast milk up to 5.30am.
- They should have a drink of water or squash (not fruit juice), to be finished by 7.30am.
Children over 1 year of age
- Can have cow's milk up to 2.30am.
- Can drink formula milk up to 2.30am.
- Can have breast milk up to 2.30am.
- They should have a drink of water or squash (not fruit juice), to be finished by 7.30am.

DRINK
Your child should continue to drink clear fluid (such as water, squash, clear fruit juice without bits and clear non-fizzy drinks) up until **7.30am**, unless you have been told there is a medical or a procedural reason why they should not.

If you are travelling to the hospital before 7.30am, please take clear fluids with you (ideally a favourite drink) and offer your child a drink on the way (as close to 7.30am as possible). This will help to avoid dehydration, as it may be some time before your child will be able to have another drink.

If your child has been asked to take any special fluids, please follow the instructions you will have been given.

ON THE DAY OF YOUR CHILD’S ADMISSION OR PROCEDURE

Chewing gum or boiled sweets
Please do not give your child chewing gum or boiled sweets on the day of their procedure. These are classified as food, as they stimulate the production of juices in the stomach.

WHEN YOU ARRIVE AT THE HOSPITAL

When we know the actual start time of the procedure, you will be told if your child can have another drink. This is usually allowed up to 1 hour before the actual start time of the procedure.

If your child is thirsty, please ask the nurse or doctor if it is possible for them to have another drink.

MEDICATION

Your child can continue to take all their usual medication (including inhalers) as usual, unless you have been told they should not. These can be taken up to 30 minutes before the procedure, together with a small amount of water (up to 75ml).

If your child has diabetes, you will be given separate advice about when they should have their insulin or tablets.

Further advice is available from the Pre-operative Assessment Clinic.
Tel: 01865 ........................................

If you have a specific requirement, need an interpreter, a document in Easy Read, another language, large print, Braille or audio version, please call **01865 221 473** or email **PALS@ouh.nhs.uk**

Author: Practice Development Nurse, with input from Children’s Directorate and Clinical Policy Group
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Oxford University Hospitals NHS Foundation Trust
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