

## Dear Parents,

Your child is going to have out-patient surgery subject to general anaesthesia. This leaflet will inform you about out-patient anaesthesia, its preparation, any follow-up treatment and everything that you and your child should know and observe to make the surgery and anaesthesia pleasant and as safe as possible.

Evaluation of the anamnesis sheets is an essential part of anaesthesia preparation, and usually sufficient. For some surgeries, and if there are certain pre-existing conditions in your child, it may be necessary to conduct further examinations. These should be done by your paediatrician. In the information interview, you may ask us about everything that you or your child want to know in connection with anaesthesia. We will explain the process to you (induction, maintenance and emergence) as well as general and special risks of anaesthesia.

You will be able to mostly prevent incidents (in particular dangerous passage of stomach contents into the lungs) during anaesthesia by appropriate behaviour. Therefore, please observe the following information under all circumstances unless your doctor has ordered something different:

- Eating: A light meal is permitted until 6 hours before anaesthesia commences. After this, eating is forbidden (including chewing gum, candy, etc.)!
- Drinking: In the period between 6 and 2 hours before anaesthesia commences, only 1-2 glasses of water or tea (without any milk) are permitted.

Please inform your doctor if you have not precisely observed these instructions!

Your child may continue to take the usual medicines with a sip of water upon coordination with us. Children with diabetes should only inject insulin upon coordination. Please do not apply any make-up, facial cream or nail varnish or have them applied. Please inform us about any acute infections with fever, any medicines taken and the last intake of food or fluids.

Directly before the intervention:

- Empty bladder/check diaper.
- Take off watch and jewellery.
- Take out contact lenses.

Procedure in the surgical theatre / treatment room:

- A sedative will be given about 20 minutes before anaesthesia is induced.
- A winged infusion set will be applied.
- Monitoring equipment for monitoring the cardiovascular function and breathing will be connected.
- We will let your child breathe oxygen via a mask.
- Then the soporific will be given. Children often react to the injection with a dry cough. This is a frequent occurrence and not a complication!

You may stay with your child up to this point.

Usually, falling asleep is perceived as pleasant. In order to increase safety of the anaesthesia, intubation will take place after falling asleep: a plastic tube is inserted into the trachea. Alternatively, a mask can be inserted into the throat (laryngeal mask). Sometimes, the intubation may lead to temporary throat problems after anaesthesia. The increased safety from intubation outweighs this discomfort by far, though. Intubation is only dispensed with in very short interventions.

Today, anaesthesia permits good control of respiration, cardiovascular function and other important body functions due to precise dosage and combination of various anaesthetics as well as the use of state-of-the-art anaesthesia devices. Potentially fatal complications from anaesthesia. Severe cardiovascular problems up to heart failure, oxygen under-supply, respiratory distress or other breathing problems that may also be caused by allergic reactions are very rare even if there are any prior health problems. Aspiration, i.e. entry of stomach contents into the lungs, is also very rare, with occurrences only increased if the patient has previously eaten, drunk or smoked. Sore throat, nausea, vomiting, trembling or unpleasantly sore muscles occur in some cases but are only temporary. Tooth damage or loss of teeth can occur in particular if the teeth are already damaged or in case of parodontosis.

You may return to your child right after anaesthesia, since the child will be more comfortable if a person he or she trusts is nearby. Usually, you can take your child home two hours after the end of anaesthesia. For this, it is necessary that the circulation has stabilised and your child can get up and walk easily. We will give your child something to drink briefly after the anaesthesia unless the surgeon has ordered something different.

## At home:

- Keep your child with you the next day and do not let your child play outside of the flat.
- If there is any pain, give the prescribed medicines at the prescribed dose.
- Unless recommended any differently by the surgeon, the child may start to eat right away (light food).

If your child experiences any problems that you put down to the anaesthesia, you can call us at: **0160 96873251** or contact your surgeon.

In case of breathing, circulatory problems or disturbed consciousness that you perceive as threatening, call 112.

Thank you for your effort and your cooperation!

Your anaesthesia team – anästhesiepunkt.