

PREOPERATIVE ORAL FLUIDS – SCH

PRACTICE GUIDELINE®

DOCUMENT SUMMARY/KEY POINTS

- Preoperative Oral fluids will be given unless there is exclusion criteria
- The administration of Preoperative fluids will be offered to minimise the risk of dehydration.

CHANGE SUMMARY

- Scope changed from SCH ED guideline to SCH facility guideline

READ ACKNOWLEDGEMENT

- All SCH clinical staff medical and nursing must read and acknowledge they understand the contents of this document.

This document reflects what is currently regarded as safe practice. However, as in any clinical situation, there may be factors which cannot be covered by a single set of guidelines. This document does not replace the need for the application of clinical judgement to each individual presentation.

Approved by:	SCHN Policy, Procedure and Guideline Committee	
Date Effective:	11 th April 2023	Review Period: 3 years
Team Leader:	Anaesthetist	Area/Dept: SCH Anaesthetics

Purpose/Scope

The aim of this document is to give clinicians guidance on providing preoperative clear fluids and applies to all children at SCH who are fasting because they are having anaesthesia or sedation (e.g. for an operation, procedure or investigation).

The administration of preoperative clear fluids will be offered to minimise the risk of dehydration and potential stress to the child and their parent/carer.

Inclusions

- Children who are fasting whilst waiting for an operation, investigation or procedure.

Exclusions

- If there is a surgical or medical order for *Nil By Mouth* (NBM) for a reason other than fasting for anaesthesia.
- If the procedural anaesthetist documents otherwise in the eMR.
- If the child does not want to drink.

For any queries, please contact the Paediatric Duty Anaesthetist on 0429 862 782, the Anaesthetic Duty Fellow on 0499 188 877 or the Paediatric Emergency Anaesthetic registrar via 20500 or pager 44166.

Implementation

- Normal fasting guidelines continue:
 - No food or milk for 6 hours prior to anaesthesia
 - Children under 6 months can have formula milk up to 4 hours prior and breast milk up to 3 hours prior to anaesthesia/sedation.
- Children who meet the inclusion criteria will be commenced on the oral fluids protocol by the nurse once their solid fasting time commences.
- Children will be offered clear fluids (e.g. water, clear apple juice, hydralyte, cordial, ice chips/ice blocks) to a **maximum of 3mL/kg/hr until called to theatre**.
(NB: Use best estimate available of volume. Aim to be around 3mL/kg/hr, but it is recognised this may not be highly accurate especially when sucking on ice blocks.)
- Infants who are exclusively breast fed or formula fed may be offered oral glucose 5% solution [Glucose Anhydrous (Glucodin) solution Oral Powder].
- Children should be encouraged to sip or suck slowly on the allocated amount each hour.
- The nurse will provide the parent/carer with the pre-operative fluid information sheet. The parents/carer can then use this sheet to document the total amount ingested each hour.

- The duty anaesthetist should be contacted if the patient is showing signs of dehydration. Based on the clinical assessment of the patient the Duty Anaesthetist may recommend an oral fluid bolus or fluid challenge.

Clear Fluids

- Clear fluids may be defined as “anything when in its liquid form you can see through or read newsprint through.
- Clear fluids can be given via nasogastric or gastrostomy tubes if appropriate.

Medications should be given at the usual prescribed time, even if shortly before the anaesthetic. They can be taken with a sip of clear fluids.

Clear Fluids include:

- Anything you can see through when in liquid form, such as:
 - Water, ice-cubes/chips
 - Glucose containing fluids such as: apple juice (pulp free), cordial, lemonade, ice blocks
 - Electrolyte drinks such as hydralyte™ or gastrolyte™ or even “sports drinks” such as Gatorade™ and Powerade™
 - Oral glucose 5% solution

Clear Fluids DO NOT include:

- Anything with protein, fat, fibre or particles and includes:
 - Lollies, sweets or chewing gum, even if the child is only “sucking” them
 - Thickened fluids, starch or corn-starch
 - Bone broth
 - Any protein drinks
 - Anything dairy – e.g. milk, skim milk, yoghurt, Yakult™, watered-down milk, formula, vanilla flavoured milks
 - Anything with fruit pulp or vegetable fibres – e.g. “real” or freshly pressed/crushed apple, coconut, pineapple or other fruit juices
 - Coloured soft drinks- e.g. Cola
 - Anything given to “help” get medications down – e.g. Nutella, peanut butter, yoghurt – no matter how small the volume

How Much Fluid

 <p>STYROFOAM CUP 220 mL</p>	 <p>COMPOSTABLE CUP 230 mL</p>	 <p>LIDO LEMONADE 300 mL</p>
 <p>BERRI APPLE JUICE 110 mL</p>	 <p>ICE DISPENSER ICE CHIPS/CHEWBLET Approx 2.5 mL each</p>	 <p>FULL CUP OF ICE CHIPS/CHEWBLET Approx 130 mL</p>
 <p>STANDARD FREEZER TRAY ICE CUBE 15 mL each</p>	 <p>BULLA ICY POLE 75 mL</p>	 <p>HYDRALYTE ICE BLOCK 60 mL</p>

Information obtained from FoodWorks Version 10, QLD Health, NEMO- Amounts in common food and drinks (2019) and Follet Company Website 2023

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