

# Medication Management Clinical Practice Guidelines

TITLE:	Pediatric Feeding/Fasting Guidelines for Pediatric Patients Receiving Sedation or General Anesthesia	NUMBER:	20.35
Sponsor:	Department of Pediatric Anesthesiology Drugs & Therapeutics Committee	Page:	1 of 3
Approved by:	Medical Advisory Committee	Approval Date: Effective Date:	June 2, 2020 June 2, 2020
Applies To:	Children's Health Program: Operating Room, Peri-operative Staff, Surgeons, Day Surgery, Inpatient Units, and Ambulatory Clinics; Neonatal Intensive Care Unit; Pharmacy		

## **GUIDING PRINCIPLES & VALUES**

This pediatric guideline will provide information regarding pre-operative feeding/fasting to ensure minimal gastric contents of suitable pH, while avoiding patient dehydration and hypoglycemia, to reduce risk factors for particulate acid gastric aspiration. It will all provide guidance on the safe and appropriate administration of medications during the perioperative fasting period.

#### **GUIDELINES**

## 1.0 FEEDING

For elective sedation and anesthesia, the following fasting times are required:

- 8 hours prior to procedure: STOP any intake of full meals or fatty foods
- 6 hours prior to procedure: STOP milk and any other milk like products, infant formula and fortified expressed breast milk
- 1 hour prior to procedure: STOP clear fluids (e.g. apple juice, water, Pedialyte™)

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#### 2.0 MEDICATIONS

## **NPO for Sedation or General Surgery**

- To avoid aspiration, ideally, oral medications should be given 2 hours preoperatively to patients who are NPO.
- If oral medications are due within 2 hours pre-op, and cannot be given earlier, it is still important to take these medications, unless otherwise specified in an authorized prescriber, or other health centre approved checklist. (as examples ACE inhibitors, anti-platelet agents).
- Medications may be given with 15 mL of clear fluids.
- **If required**, pediatric patients may take up to 30 mL (2 tablespoonsful) of a soft food may be taken for medication administration only.

#### **NPO for Cardiac Catheterization**

- Holding medications of a patient prior to cardiac catheterization is rarely necessary.
- Medications should be continued, unless otherwise ordered.

#### REFERENCES

Canadian Pediatric Anesthesia Society. (2018). Canadian Pediatric Fasting Guidelines Ratified 2018. Retrieved from <a href="https://www.pediatricanesthesia.ca/about/committees/22-guidelines-committee/63-new-canadian-pediatric-fasting-guidelines-ratified-by-the-canadian-pediatric-anesthesia-society.">https://www.pediatricanesthesia.ca/about/committees/22-guidelines-committee/63-new-canadian-pediatric-fasting-guidelines-ratified-by-the-canadian-pediatric-anesthesia-society.</a>

#### **RELATED DOCUMENTS**

Sedation Outside of the Pediatric Operating Room, excluding PICU, NICU and the Emergency Department – Policy 50002

Pediatric OR Checklist - Form

#### **APPENDIX 1**

## **DEFINITIONS**

Clear Fluids: Any fluid you can read a newspaper through and is fully clear with

no particles or opacity, e.g.: apple juice (not cider), water,

cranberry juice, Pedialyte™, white grape juice

Note: Jello and popsicles are NOT clear fluids. Chewing

gum is also NOT permitted.

Fortified Breast Milk: Breast milk that has been enriched with one or more nutrients

and/or additives.

**General Anesthesia:** There is no perception of pain and patients should be expected to

require airway management, although they may be breathing

spontaneously.

**NPO:** nil per os (nothing by mouth)

**Soft foods include**: jello, ice cream, pudding, applesauce and yogurt

**IWK Policy Replaced** 

Policy 20.36 replaced Clinical Policy 1417 in 2016

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# **Version History**

Major Revisions (e.g. Standard 4 year review)	Minor Revisions (e.g. spelling correction, wording changes, etc.)
Revised Feb. 2/16 version on June 2/2020	