



Day Surgery Sedation for Children Parents' Information



Online Version

2021/09

What is sedation?

Sedation is a process to make one **sleepy and comfortable** by administering drug(s) (sedatives) during procedures. It is required in many medical procedures in children including radiological examination because these tests require children's **cooperation and to be still** throughout the procedure.

Sometimes, these procedures are associated with some discomfort. Sedation enables your child to undergo the procedure without discomfort or fear. With sedation, your child may or may not be aware of what is going on during the procedure. Your child may or may not remember the procedure after sedation and when effects of drugs are worn off.

Who is there to provide the sedation?

A team of **anaesthesiologist** and **nurse** will be responsible for the sedation and taking care of your child during the procedure. The team will **monitor your child's wellbeing and stay with your child** throughout the procedure and manage any **emergencies and complications** related to sedation. They will also be responsible for your child's recovery and discharge.

Assessment before sedation

Your anaesthesiologist will **assess** your child before sedation. He/she may ask some questions about your child's past and current health status. He/she will perform relevant physical examination, review investigation results and order further investigations if needed. Your anaesthesiologist will also **discuss with you about your child's sedation plan and obtain your consent**. This is a good time to express any particular concern you have about sedation.

How can I prepare my child for sedation?

These are some **useful points** shared by many parents to prepare their children for sedation:

- ✓ Except for very young children, explain to your child about the **timing of procedure**. If your child will stay in hospital, let him/her know **the duration and when he/she can see you**.
- ✓ Explain that the procedure will help him/her **get better**.
- ✓ Bring his/her **favourite toy/blankets** to admission and procedure.

Why must my child fast?

If there is food or liquid in your child's stomach during sedation, it could come up from the stomach and **get into his/her lungs (aspiration)**. Fasting improves your child's safety. If your child fails to fast, the procedure may be **cancelled or postponed**. Anaesthetic team will try their best to keep fasting as short as possible. The anaesthesiologist will give you clear instructions on fasting.

Should my child take his/her usual medications during fasting?

The anaesthesiologist will **advise** you on the arrangement of these medications. When needed, your child can take medications with a mouthful of **water** during fasting.

What should I do if my child feels unwell before/on the day of procedure?

Please **inform hospital staff** if your child feels unwell within a few days of the procedure. Generally speaking, it may be best to **delay** the procedure until he/she feels better. Please inform hospital staff if your child **has been in recent contact with chickenpox, hand-foot-mouth disease or other infectious diseases**.

What will happen on the day of procedure?

- ✓ Before going to procedure, your child may **get changed**. A staff concerned and you will accompany your child to the examination room. Your child can bring his/her **favourite toy or comforter**.
- ✓ You may be allowed to **stay with your child** until he/she is asleep. However, there are **few circumstances when this will not be possible**. You can discuss with the anaesthesiologist about this.

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- ✓ **Monitors** will be attached to your child to keep him/her safe throughout the procedure.
- ✓ Your anaesthesiologist can start sedation by giving your child a drug to swallow, applying to his/her **nose** or asking him/her to keep it **under tongue or between cheeks**.
- ✓ An **intravenous cannula** may be placed for other medications (e.g. contrast used during CT or MRI scans) or additional sedative may be directly given to your child during the procedure.
- ✓ Your child may also receive **pain relieving drugs** if necessary.
- ✓ To ensure safety, anaesthesiologist or nurse will **monitor** your child's physical conditions during the sedation.

Is there any risk of sedation?

In general, sedation is safe. The underlying risk is related to your child's medical condition, the sedative drugs used, the experience and training of the doctor administering sedation and the procedure being performed. The possible complications associated with sedation can be classified into the following groups: **Common**, **Uncommon**, and **Rare**:

Common side effects (1 in 100)

- Nausea or vomiting
- Paradoxical excitation
- Failed sedation that may lead to rescheduling of procedure, or conversion to general anaesthesia

Uncommon side effects (1 in 1000)

- Airway obstruction
- Decreased breathing effort
- Unstable blood pressure and irregularities of heart beats

Rare side effects (1 in 10,000-100,000)

- Aspiration of gastric contents
- Adverse drug reactions, including allergy reactions which may be severe

What will happen after sedation?

- ! Your child **will be monitored for an appropriate duration** after the sedation/procedure is completed.
- ! Your child can go home after recovery from sedation **with a responsible adult escort**.
- ! Your child may **feel confused and unsteady** after procedure. It can also affect his/her judgement so he/she may not be able to think clearly. This may last for up to 24 hours.
- ! Your child **should not be left unattended by an adult** in the next 24 hours.
- ! Have an adult **sit next to your child** during the ride home. Young child **may fall asleep with his head fall forward or aside** under the residual effect of the sedation. This may block his airway and affect his breathing.
- ! Some children **feel sick or may be sick** on the journey home. It is useful to be prepared!
- ! After your child is fully awake and alert, you may start **feeding with sips of water**. If there is no choking/ vomiting after 10-15 minutes, your child may try **low residue fluid** eg. fruit juice, then **regular diet**.
- ! Please **take the prescribed medication and the usual medicines as instructed**.
- ! Some children do not sleep well after a stay in hospital. They may be clingy and worried about leaving you. **Their behaviour may be more difficult than before**. This will usually return to normal within three to four weeks.

What should my child NOT do?

For at least 24 hours after procedure, please **do not**:

- ✗ Participate in vigorous game or activities
- ✗ Climb heights
- ✗ Ride bicycle or operate any machinery
- ✗ Consume alcohol or sedatives

Please **accompany** with your child if possible to **prevent fall**.

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If you have any query concerning sedation procedure after returning to home, you may **contact the following number:**

Pok Oi Hospital Day Ward service hour for enquiry	Monday - Friday	7:30am – 6:30pm
	Saturday Sunday or Public Holiday	Closed
	Hotline: 2486 8280	
Related Wards service hour for enquiry	Monday – Friday	6:30pm – 7:30am
	Saturday Sunday or Public Holiday	24 hours
	6N: 24868683 6C: 24868850 6S: 24868693 3S: 24868393 4S: 24868493	

Tin Shui Wai Hospital Day Ward service hour for enquiry	Monday - Friday	7:30am – 6:30pm
	Saturday Sunday or Public Holiday	Closed
	Hotline: 3513 5280	
Related Wards service hour for enquiry	Monday - Friday	6:30pm-7:30am
	Saturday Sunday or Public Holiday	24 hours
	Hotline: 3513 5690	

Alternatively please contact your **GP** or attend your **nearest A&E department**. Make sure you tell them about the procedure you have just done

We will phone contact you 1 day after surgery, should you have any problems feel free to ask us then as well.

Remarks

This is general information only and the list of complications **is not exhaustive**. Other unforeseen complications may occasionally occur. In special patient groups, **the actual risk may be different**. **Please contact your doctor for further information**. Complications may sometimes occur despite all precautions. However, if they do occur, your doctor will take appropriate steps to manage them.

Reference

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5. Cravero JP, Beach ML, Blike GT et al. The Incidence and Nature of Adverse Events During Pediatric Sedation/Anesthesia with Propofol for procedures outside the Operating Room: A Report from the Pediatric Sedation Research Consortium. *Anesth Analg* 2009;108:795-804
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