


Procedure for Preoperative Fasting Prior to General Anaesthesia	
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1.0 Policy Statement

Fasting prior to anaesthetic is essential to reduce the risk of vomiting or regurgitation and aspiration of stomach contents. However, prolonged fasting can be detrimental too. All patients must be adequately prepared before general anaesthetic as set out below.

2.0 General Responsibilities

2.1 All staff must adhere to the policies and procedures relevant to their area of work.

2.2 Line Manager / Head of Department must ensure their staff are aware of and compliant with all policies and procedures relevant to their area of work.

3.0 Procedure

The fasting procedure are as follows:

Patients scheduled for surgical procedures or general anaesthesia for imaging:

Clear Fluid	1 hour
Breast Milk	4 hours
Solid food, including milk	6 hours

Encourage drinking of clear, non-fizzy sugar containing solutions (i.e. apple juice) until 1 hour before theatre unless directed otherwise by the anaesthetist in charge of the case. Approximately 3mls / kg/ hour is acceptable up to maximum of 200mls / hour.


Times may vary according to individual anaesthetic practice and patient specific conditions. If there is any concern or queries, please discuss with the Consultant Anaesthetist in charge of the list.

4.0 Continuous Review

This policy and procedure shall be reviewed and updated at least every 3 years by the Department of Anaesthesia and the Operating Theatre Education Facilitator in order to determine its effectiveness and appropriateness. It shall be assessed and amended as necessary during this period to reflect any changes in best practice, law, substantial organisational change and professional or academic change.

5.0 Audit and Evaluation

In order to ensure the effectiveness of this policy and procedure, the Operating Theatre Clinical Education Facilitator shall complete an audit annually to review and monitor compliance with this policy and procedure. The Operating Theatre Clinical Education Facilitator must further

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provide a systematic process for the reporting and investigation of compliance breaches, or potential breaches, to enable proactive prevention in the future.

6.0 Key Stakeholders

The following key stakeholders were consulted or involved in the development of this document:

- **Dr Robert Ghent Consultant Paediatric Anaesthetist**
- **Dr Barry Lyons Consultant Paediatric Anaesthetist**

7.0 References

Perioperative Fasting in Children

BJA Education, Volume 17, Issue 10, 1 October 2017, Pages 346-350.

Consensus Statement on Clear Fluids Fasting for Elective Paediatric General Anaesthesia
Paediatric Anaesthesia, Volume 28, Issue 5.

Low Incidence of Pulmonary Aspiration in Children Allowed Intake of Clear Fluids until Called to the Operating Theatre

Andersson H, et al, Paediatric Anaesthesia, 2015 August, 1;25(8):770-7.

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