Frequently Asked Questions

1. What can my child eat and drink the night before and day of surgery?
   - **No** food for **8 hours** before your child’s surgery (even food or formula given through a feeding tube)
   - Your child may have:
     - Formula or milk **up to 6 hours** before surgery
     - Breast milk or an unlimited amount of clear fluids up to **4 hours** before surgery
     - A limited amount of clear fluids up to **2 hours** before surgery if his/her doctor approves. The amount is based on age:
       - 0 to 4 years old: no more than 2 ounces (1/4 cup)
       - 5 to 13 years old: no more than 4 ounces (1/2 cup)
       - Over 13 years old and adults: no more than 8 ounces (1 cup)
   - Clear fluids are:
     - Water
     - Apple or white grape juice
     - Carbonated drinks, such as soda pop
     - Sports drinks such as Gatorade®
     - Pedialyte®
     - Clear tea
   - **No** milk, creamer, or lemon added to any drinks
   - **No** gum, mints, or candy
   - **Do not eat or drink 2 hours before surgery.**
   - Crushed medicines may be given with up to 2 tablespoons of plain apple jelly.
     - **Do not** use apple pudding or apple sauce.

   Your child’s stomach must be empty for surgery. We do not want food from your child’s stomach to get into the lungs during surgery. Surgery will be delayed or rescheduled if you do not or cannot follow these instructions.

2. Why can’t my child eat or drink before surgery?

   Our protective reflexes slow down when we are given anesthesia. One protective reflex is to keep stomach contents from going into our airway. Aspiration can happen when stomach contents enter our airway. This is less likely to happen when the stomach is empty. Fasting (not eating or drinking) keeps your child’s stomach empty.

3. Why is aspiration so bad?

   Solid or semi-solid stomach contents may not let the lungs get air. Liquid stomach contents that are acidic may burn the lungs and stop them from getting air. Both types of aspiration may cause brain damage or death. Aspiration can be treated. Most people survive, but treatment in an intensive care unit (ICU) is often needed. Aspiration may lengthen your child’s hospital stay by days to weeks.

4. Should I wake my child up 2 hours before the scheduled time for the surgery to give him/her clear liquids?

   Yes, do not let them get dehydrated. If your 5-year-old child’s surgery is scheduled to start at 8 a.m., give him/her up to 4 ounces of a clear fluid before 6 a.m. You may want to wake your child for fluids at 5 a.m. so he/she is done drinking by 6 a.m.
5. My child was in an automobile accident and needs emergency surgery. My child ate just before the accident, and it has only been 4 hours. The doctor says my child needs the surgery now. Why does my child not have to wait 8 hours?

Guidelines help doctors and patients decide about health care. Fasting guidelines are not meant to be the final decision. The risk of aspiration must be weighed against the risk of not having surgery in a timely manner. Your child’s anesthesiologist may change the type of anesthesia to lower your child’s risk.

6. Can my child chew gum or suck on hard candy while waiting for surgery?

No. Your child can have nothing for at least 8 hours before surgery.

7. What about carbohydrate-rich drinks?

Your child can drink clear carbohydrate-rich drinks up to 2 hours before surgery. Your child cannot drink fluids that have dairy or pulp. Talk with your child’s health care team if you have questions about a specific drink. If you do not know the ingredients of a drink, 6 to 8 hours of fasting is thought to be a safe time frame.

8. What about Jell-O?

Jell-O® is a trade name for one company that makes many forms of gelatins. Gelatins are made when a powder is mixed with water and forms a semi-solid when cooled. Some forms of gelatins may also have milk and fat, such as puddings. Studies have found gelatin can be found in peoples’ stomachs many hours after it is eaten. This keeps your child’s stomach from being empty and can be an aspiration risk. All gelatins are treated as food, and your child must not have them for 8 hours before surgery. Risks and benefits of the safety and urgency of the surgery after eating gelatin verses the risk of aspiration must be talked about with you and the health care team.

9. Can my child have honey?

No.

10. Why can I only use apple jelly to give crushed medicines to my child?

Apple jelly is made from apple juice that has been boiled and cooled causing it to thicken. Apple juice is an approved clear fluid. Plain apple jelly can be eaten up to 2 hours before surgery. On the day of your child’s surgery, apple jelly may be used to take crushed medicine. Do not use pudding or apple sauce.

11. Who came up with the fasting guidelines?

They are based on medical research and expert opinion. The American Society of Anesthesiologists and the European Society of Anesthesiologists each have task forces to make them. Faculty in the Department of Anesthesia at the University of Iowa adapts these guidelines for University of Iowa Stead Family Children’s Hospital.

12. If my child takes food in through an enteral or nasogastric tube (gastric/stomach tube, enteral/jejunostomy tube), should I follow the same fasting instructions?
Fasting for 8 hours from feeds is preferred.

13. My child’s doctor wants to cleanse his/her bowel (do a bowel prep) before the procedure. The doctor prescribed GoLYTELY® (polyethylene glycol electrolyte [PEG]). What is the fasting time between taking GoLYTELY® and when he/she can have regional, general, or monitored anesthesia care?

Endoscopists at the University of Iowa will sedate people after 2 hours of having GoLYTELY®. Adult colorectal surgeons have people who have elective surgeries start drinking GoLYTELY® at 3 p.m. or sooner they day before, to be done before midnight.

Medical research found there may be an aspiration risk from polyethylene glycol electrolyte solution (PEG), an ingredient in the GoLYTELY®. Studies say to fast for 4 to 6 hours.

Stop GoLYTELY® at least 4 hours before the scheduled procedure time.