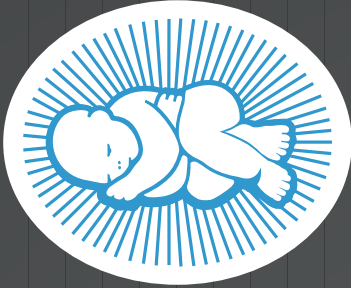


RCOA

Royal College of Anaesthetists



Association of Paediatric Anaesthetists
of Great Britain and Ireland



General Anaesthesia

A BRIEF GUIDE FOR YOUNG PEOPLE FROM 12 YEARS OLD

General anaesthesia

General anaesthesia is when your anaesthetist uses a medicine (or sometimes anaesthetic gas) to make you become unconscious. This feels like a deep sleep and means that you can't see, hear or feel anything during your procedure (what you are having done).

General anaesthesia is essential for many procedures including surgeries /operations and some medical tests.

Anaesthesia team

Anaesthetists are doctors who have had specialist training in using anaesthetic drugs to keep people comfortable and safe while they have surgery and/or tests.

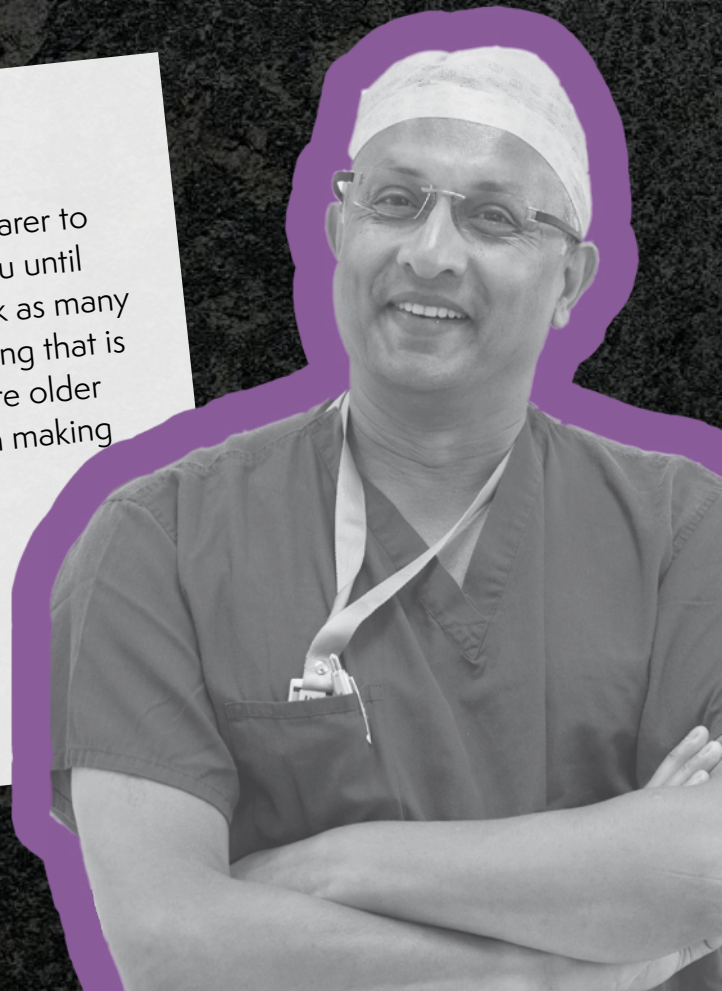
You and your parent/carer will meet an anaesthetist before your procedure. They will ask about your health and agree a plan with you for your anaesthetic and pain relief. They will be happy to answer any questions you have.

Other staff members will support the anaesthetist including Anaesthesia Associates, operating department practitioners (sometimes called ODPs) and theatre nurses.

Consent

The anaesthetist will work with you and your parent/carer to agree a plan for your care. Nothing will happen to you until the plan has been discussed and agreed. You may ask as many questions as you like so that you understand everything that is happening and 'consent' (agree) to the plan. If you are older you will be able to play a greater role in the decision making as your understanding is likely to be deeper.

Either you or your parent/carer will sign a consent document once you are happy with the proposed anaesthetic care. You can read more about consent in our [web guide for young people \(rcoa.ac.uk/childrensinfo\)](http://rcoa.ac.uk/childrensinfo)



Getting ready for your anaesthetic

Your health

- You need to be as healthy as possible before having an anaesthetic. Making healthy lifestyle changes before you have an anaesthetic will help you recover more quickly.
- If you can, in the six weeks before your operation try to avoid breathing in other people's cigarette smoke and don't smoke yourself. Perhaps consider asking anyone you live with who smokes to do so outside during this time.
- Children and young people are advised not to drink alcohol before the age of 18. Alcohol and recreational drug use during your teenage years can lead to a wide range of health and social problems.
Read more on the NHS website (bit.ly/3mo2QP0).
- If you have any long-term medical problems that are not well controlled, you or your parent/carer should contact your GP or specialist before the date of your surgery and tell them that you are due to have an anaesthetic. You can then talk to them about what steps you and your anaesthetist need to take for you to be safe as possible during your time in hospital.
- Bring your medicines you take on a regular basis with you to the hospital.
- For your own safety, your anaesthetist needs to know if you are on the contraceptive pill or have used any recreational drugs.
- If possible, find information about any allergies or any family members who have had a reaction to anaesthetics, so you can tell your anaesthetist.
- It is normal to do a pregnancy test for any girl over the age of 12 by testing a urine sample. To find out about why this is done, **read this leaflet (bit.ly/31Qncab)**. We know that this could seem embarrassing, but the staff are used to doing these tests as discretely as possible.
- When the anaesthetist asks you questions about smoking, drinking and taking drugs, please do be honest in your answers. We know it may be awkward to discuss these issues, so if you would prefer for your parent/carer not to be present, you can ask to speak to the anaesthetist alone.
- Your parent/carer will need to know enough about the operation and any risks to be able to consent for your surgery if you are not old enough to sign your own consent form.
- Before you come to the hospital, if possible, find information about any allergies, or any family members who have had a reaction to anaesthetics, so you can tell your anaesthetist.



Eating and drinking before your anaesthetic

- The hospital should give you clear instructions about when you should stop eating and drinking before your procedure.
- It is important for your safety to follow these instructions. If there is food or too much liquid in your stomach during your anaesthetic, it could come up into the back of your throat and then go into your lungs. This can cause choking or serious damage to your lungs. You will usually be encouraged to have smaller amounts of clear fluid (usually water or dilute squash) – this is safe until closer to the time of your anaesthetic.

Clothing

- Wear something loose and comfortable that is easy to wash afterwards.
- Ask if you need to bring pyjamas, slippers and/or a dressing gown.
- Bring something to change into for going home.
- You may be asked to wear a hospital gown.
- Usually you can keep on most of your underwear when you go to the theatre, including a bra if it doesn't have metal underwiring, but check with your nurse. Underwear sometimes may need to be removed during the operation or test.
- Occasionally the surgeon may shave some hair from the surgical area, but they will usually tell you beforehand if this will happen.
- You may be asked to put on knee length elasticated socks before your operation. These help to keep the blood moving around your legs well to prevent blood clots.

Jewellery and make-up

- Please leave any jewellery and decorative piercings at home if possible. If you cannot remove your jewellery, it should be possible to cover it with tape to prevent damage to it or to your skin.
- Please avoid wearing make-up and nail varnish. These may need to be removed by hospital staff so they can monitor you during the procedure.

Filling the time

- There is often a lot of waiting around.
- Bring something to do (for example, a book, a magazine or your mobile phone). Please remember your headphones and chargers.
- Please remember not to smoke or chew gum during this waiting time, and to carefully follow the guidelines on eating and drinking.



Having an anaesthetic

- Your anaesthetist will often start your anaesthetic in a room next to the operating theatre, called the anaesthetic room. Sometimes it may happen in the room where the operation/test will take place.
- Your anaesthetist will usually start your anaesthetic by giving you some medication through a cannula (see below for more information on this). Less commonly they will ask you to breathe in a gas that smells a bit like felt-tip pens. Sometimes you can choose which to have.
- Giving the medication through your cannula is the quickest way to anaesthetise you. If you breathe the gas, you will have a cannula put in once you are unconscious, so the anaesthetist can give you more anaesthetic, painkillers or other medicines and fluids during your procedure. Either method might make you feel light-headed (woozy) before you become unconscious.
- If you want, your parent/carer may be able to stay with you until you are unconscious. After that, they can wait

for you in a waiting room or on the ward. Alternatively, a nurse will stay with you while the anaesthetic is starting to work.

Cannula

- A cannula is a thin, flexible plastic tube that is put into a vein, usually on the back of your hand.
- You may be offered a numbing cream or a special cold spray for the back of your hand to reduce any discomfort when the cannula is put in.
- A fine needle is used to put the cannula in, then the needle is removed straight away.
- Once the cannula is in place, your medicines can be given through it without using any more needles. Sometimes this can cause a bit of coldness, tingling or mild discomfort.
- Your cannula is usually left in place after the operation in case you need painkillers, fluids or other medicines later.

During the anaesthetic

- An anaesthetist will stay with you all the time.
- The anaesthetist's job is to keep you safe and give you enough anaesthetic and pain relief to keep you unconscious until the operation is over.
- Waking up in the middle of an anaesthetic is extremely rare, because the anaesthetist monitors you very closely (including your blood pressure, heart rate and breathing) to make sure you receive the right level of anaesthetic.



Waking up afterwards

- Operations/tests all take different lengths of time, but as soon as the procedure is finished, the anaesthetist will stop giving you the anaesthetic drugs. This will allow you to wake up about five minutes later.
- You will probably wake up in the recovery room but you may not remember the first few minutes or realise exactly where you are. A trained member of the theatre team, usually a recovery nurse, will be looking after you.
- How you feel afterwards will depend on the type of procedure and anaesthetic you have had. Some people may have a sore dry throat, a headache, feel shivery or a bit sick. Your anaesthetist will usually give you medicine to prevent you feeling or being sick. Sometimes you may feel a little cold or shivery – if so you will be offered a heated blanket to quickly warm you.

Treating pain

- It is important to prevent and treat pain, and some people (and some types of operation) need more pain relief than others.
- It is easier to treat pain before it gets bad, so you should ask your recovery nurse or anaesthetist for help whenever you start to feel uncomfortable, rather than waiting until it gets worse.



Back on the ward

- You may feel very tired at first.
- If you have any problems, let someone know so they can help. You may have to press a buzzer or ask your parent/carer to find a nurse for you.
- How soon you can eat and drink, again will depend on the type of procedure and painkillers you have had. Your nurse or anaesthetist will be able to advise you.
- You will stay in hospital until it is safe for you to go home. For many procedures you can go home on the same day if you are usually healthy and the procedure is straightforward.



Risks of anaesthesia

Serious problems after anaesthesia are extremely rare. You can find out more about the risks of anaesthesia at: [rcoa.ac.uk/patientinfo/risks/risk-leaflets](https://www.rcoa.ac.uk/patientinfo/risks/risk-leaflets)

Local and regional anaesthesia

- Sometimes you can choose to stay awake during your surgery. If this is a possibility, your surgeon and/or anaesthetist will discuss it with you and your parent/carer. In that case, you can have injections of local anaesthetic to numb a part of your body so you don't feel pain there.
- If you think you might like to stay awake, you could discuss this at your preassessment meeting with the anaesthetist or read more about it at [rcoa.ac.uk/childrensinfo](https://www.rcoa.ac.uk/childrensinfo)

If you want to find out more

- Leaflets called You and Your Anaesthetic and Anaesthesia Explained are available on the RCoA website and may be available from your local hospital.
- You can get more information at: [rcoa.ac.uk/patientinfo/leaflets-video-resources](https://www.rcoa.ac.uk/patientinfo/leaflets-video-resources)

Tell us what you think

We welcome suggestions to improve this leaflet.

If you have any comments that you would like to make, please email them to: patientinformation@rcoa.ac.uk



@RCoANews



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Disclaimer

We try very hard to keep the information in this leaflet accurate and up-to-date, but we cannot guarantee this. We don't expect this general information to cover all the questions you might have or to deal with everything that might be important to you. You should discuss your choices and any worries you have with your medical team, using this leaflet as a guide. This leaflet on its own should not be treated as advice. It cannot be used for any commercial or business purpose.

For full details, please see our website: rcoa.ac.uk/patientinfo/resources#disclaimer

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This leaflet will be reviewed within three years of the date of publication.

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