



Pediatric Anesthesiology

GENERAL ANESTHESIA WITH CAUDAL ANESTHESIA

AT CHILDREN'S HOSPITAL OF PITTSBURGH OF UPMC, we believe parents and guardians can contribute to the success of their child's visit and we invite you to participate. Please read the following information to learn about this medication, its use for your child's surgery, and how you can help.

Fast Facts About General With Caudal Anesthesia

- Your child's surgery will be done under general anesthesia (an-es-THEEZ-ya), which means that he or she will be sound asleep during the surgery.
- In addition to the general anesthesia, your child will receive caudal (COD-ool) anesthesia, which will give pain relief in the area below the waist.
- A pediatric anesthesiologist—a doctor who specializes in anesthesia for children—will give the general and caudal medications during your child's surgery.

What Is General Anesthesia?

General anesthesia makes your child's whole body go to sleep and is needed for certain surgeries so that his or her reflexes will be completely relaxed. General anesthesia makes the surgery easier and safer to do because your child will not feel any pain during the surgery or have any memory of it.

What Is Caudal Anesthesia?

Caudal anesthesia is given with general anesthesia to block pain in the legs, low back, belly and lower trunk area. It is an injection (shot) of local anesthetic that is given in the part of the back where your child sits. A caudal allows the anesthesiologist to give a smaller amount of general anesthesia during the surgery, and also provides up to 4 hours of pain relief in that area after the surgery.

Home Preparation

When general anesthesia is needed, there are important rules for eating and drinking that must be followed in the hours before the procedure. One business day before your child's procedure, you will receive a phone call from a nurse between the hours of 1 and 9 p.m. (Nurses do not make these calls on weekends or holidays.) Please have paper and a pen ready to write down these important instructions.

The nurse will give you specific eating and drinking instructions for your child based on your child's age. Following are the usual instructions given for eating and drinking. No matter what age your child is, you should follow the specific instructions given to you on the phone by the nurse.



For children older than 12 months:

After midnight the night before the procedure, do not give any solid food or non-clear liquids. That includes milk, formula, juices with pulp, coffee and chewing gum or candy.

For infants under 12 months:

- Up to 6 hours before the scheduled arrival time, formulafed babies may be given formula.
- Up to 4 hours before the scheduled arrival time, breastfed babies may nurse.

For all children:

- Up to 2 hours before the scheduled arrival time, give only clear liquids. Clear liquids include water, Pedialyte®, Kool-Aid® and juices you can see through, such as apple or white grape juice. Milk is not a clear liquid.
- In the 2 hours before scheduled arrival time, give nothing to eat or drink.
- If your child takes daily medication, you may give it unless specifically told not to do so by your child's doctor or the scheduling nurse.

Going To Sleep

Once your child has been registered for the surgery, a member of the anesthesia staff will meet with you to take your child's vital signs, weight and medical history. As the parent or legal guardian, you will be asked to sign a consent form before the anesthesia is given.

- The anesthesiologist will meet with you and your child to review your child's medical information and decide which kind of sleep medication he or she should get.
- If your child is very scared or upset, the doctor may give a special medication to help him or her relax. This medication is flavored and takes effect in 10 to 15 minutes.

GENERAL AND CAUDAL ANESTHESIA cont'd

If you wish, you may stay with your child as the sleep medication is given.

 Younger children will get their sleep medication through a "space mask" that will carry air mixed with medication. Your child may choose a favorite scent to flavor the air flowing through the mask. There are no shots or needles used while your child is still awake.

 Older children may choose between getting their medication through the mask or directly into a vein through an intravenous (IV) line.

When your child has fallen asleep, you will be taken to the waiting room.

If it has not already been done, an IV will be started on your child so that medication can be given to keep your him or her sleeping throughout the test.

After the IV has been placed, your child will be turned onto his or her side. Your child's lower back near the spine—the sacral (SAY-crul) caudal area—will be cleaned and a needle placed under the skin to inject the caudal anesthetic.

While Asleep

While your child is asleep, his or her heart rate, blood pressure, temperature and blood oxygen level will be checked continuously.

- Depending on the surgery being done, your child may have a breathing tube placed while he or she is asleep. If a breathing tube is used, your child may have a sore throat after the surgery.
- To keep your child asleep during the surgery, he or she may be given anesthetic medication by mask, through the IV tube or both. When the surgery is over, the medications will be stopped and your child will begin to wake up.

Waking Up

When your child is moved to the recovery room, you will be called so that you can be there as he or she wakes up.

- Your child will need to stay in the recovery room to be watched until he or she is alert and his or her vital signs are stable. The length of time your child will spend in the recovery room will vary because some children take longer than others to wake up after anesthesia.
- Children coming out of anesthesia react in different ways. Your child might cry, be fussy or confused, feel sick to his or her stomach, or vomit. These reactions are normal and will go away as the anesthesia wears off.
- Children who have received caudal anesthesia might have some weakness, numbness or tingling in their legs. These feelings are normal and should go away within a few hours.
- The caudal anesthesia might make it hard for your child to walk in the hours just after the surgery. You should watch your child closely for a few hours to prevent tripping or falling.

Going Home

After your child is discharged and goes home, he or she might still be groggy and should take it easy for the day.

 Your child may resume normal activities at the rate he or she is comfortable with.

- Your child may begin to eat and drink a little at a time and resume normal eating and drinking as long as he or she is feeling well.
 - Sometimes a child might have trouble urinating after caudal anesthesia.
 If your child does not urinate within 12 hours after surgery, please call the doctor who performed your child's surgery.

A nurse will call you 24 hours after the surgery to check how your child is doing.

Special Needs

If your child has any special needs or health issues you feel the doctor needs to know about, please call the Department of Anesthesiology at Children's Hospital of Pittsburgh *before* the surgery and ask to speak with a nurse. It is important to notify us in advance about any special needs your child might have.

Department of Pediatric Anesthesiology **Children's Hospital of Pittsburgh of UPMC** One Children's Hospital Drive 4401 Penn Ave. Pittsburgh, PA 15224 (412) 692-5240

To see the list of all available patient procedures descriptions, please visit www.chp.edu/procedures.