

## **Pediatric Surgery & Pediatric Urology** **Guidelines for Parents** **'All you need to know before your child's Surgery'**



Welcome to Medanta. We want to keep you informed of all steps involved in your child's surgery so that you and your family have a better experience before, during and after your child's surgery. This guide will help you to understand more about your child's surgical experience. Please read it thoroughly at your earliest convenience.

**Department of Pediatric Surgery & Pediatric Urology**  
**OPD Fourth floor, Counter No 2, Room No-25**  
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## About Department of Pediatric Surgery & Pediatric Urology

The Department of Pediatric Surgery and Pediatric Urology under the Institute of Mother and Child in Medanta is the hub of safe and comforting world of quality surgical care for your children, whose lives are priceless.

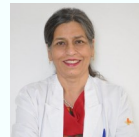
Whether it is operating on a newborn, treating childhood cancer, addressing a paediatric urological problem, or any other condition that requires surgical correction, we have created a holistic healing ecosystem that brings together highly skilled and experienced Pediatric surgeons and Pediatric anaesthetists, state-of-the-art operation theatres, advanced Neonatal and Paediatric ICUs and 24x7 specially trained medical staff.

Our team have given consistent results in Hypospadias surgery, one of the common congenital urological problems in children. We also offer laparoscopic surgery for Pelviureteric junction obstruction, one of the commonest cause of antenatal hydronephrosis, even in 5-6 kg infants . In fact, our facility offers Minimally Invasive (keyhole) Surgery for most of the surgical procedures. We are committed to providing the best available treatment to children with the tenderness and care they need.

### Our Team of Doctors



**Dr. (Prof) Shandip Kumar Sinha**



**Dr. Meera Luthra**



**Dr. Praney Gupta**



**Dr. Dr Rahul Dey**

### Day before surgery

- If your child is sick with an upper respiratory infection, ear infection, cold, cough, sore throat, fever or any other illness, please call your surgeon's office/co-ordinator to report the illness.
- Make sure your child has a bath or shower in the morning of admission. Clean skin, hair, fingers and nails will help to prevent infection.
- The exact time of your child's surgery will be finalized and will be communicated to you.
- It is strongly recommended that the Anaesthetist sees you before surgery, so that they can plan and explain the procedure in detail to you. They are available on second floor of OPD block Room No-6, at Medanta. Please ask the reception desk for guidance. This is called Pre-anaesthesia Check-up (PAC). The anaesthetists also review those admitted in ward, a day before surgery, in the allotted bed.
- Kindly collect your **Bill estimate and Request form for admission** from the Co-ordinator . Please do not reach out to anyone else in this regard.
- If you have any type of TPA/ Insurance pls check your paper with TPA counter on Upper ground Floor, counter – 11.
- If you have any government facility/CGHS/ECHS/ PSU etc., then please submit all your documents on the Platinum desk at the Upper Ground floor.

### The day of surgery at home

- Dress your child in loose, comfortable clothing. Pack an extra set of clothes.
- Remove any body piercings or jewellery and remove nail polish.
- Bring your insurance or medical card along with any ID proof of child as well as parents, such as Voter ID/ Driving License/Aadhar Card etc.
- Please bring a copy of the all medical history, physical exam and investigations .
- Please bring a list of your child's medications, including vitamins and any over-the-counter medication.
- Children are encouraged to bring their favourite stuffed animal and items (books, handheld video games, etc.) to keep them occupied.
- Please carry water/milk bottles, sippy cups and diapers as needed.
- We recommend that siblings stay at home as they are not allowed. You should plan to spend most of the day at the hospital.

## Parking

Valet parking is available at the entrance. You can also directly go to basement parking, where paid parking is available. You can take a multiple day pass to save on your parking fee. Kindly take the lift to the upper ground floor.

## Check-in

- Check in on the suggested time of arrival at the **Admission Counter**, which is located on the upper Ground (UG) floor.
- The suggested time of arrival is never the scheduled time of surgery and you may have been/ will be informed about scheduled time of surgery, either before or after arrival.
- Be prompt, as delay in arrival can delay or cancel the surgery completely.
- If you enter at the main entrance of the hospital, then take left for admission Counter.
- Keep your TPA papers, Cash or credit/debit card handy.
- Clearance of surgery after admission can be taken from Room 3 in Upper Ground floor after admission or later, before surgery.

## Next Steps

- When your child's admission process is completed, you will be directed to go to the **ward/Day-care** as per admission type.
- Patient care require that we limit the number of persons in this area. Two parents/ adults are allowed with pediatric patients in the ward. Anyone else with you should remain in the ground floor waiting area.

## Instructions for Eating and Drinking Before Surgery

### General Guidelines:

- Your child's stomach must be completely empty when surgery begins. The specific instructions on when your child should stop eating and drinking will depend upon time scheduled for surgery, which Anaesthetist/surgeon will share with you. This decision will be based on your child's type of surgery, age, and health.
- If these important safety guidelines are not followed, your child's surgery may be delayed or cancelled.

## Guideline about when to stop consumption of food or liquids for children

<b>STOP consumption hours prior to Scheduled surgery</b>	<b>Clear Liquids</b>	<b>Breast milk</b>	<b>Formula feeds</b>	<b>Light Meals</b>	<b>Solid Foods</b>
<b>Infants (upto 12 months of age)</b>	2 hours	4 hours	6h	Not applicable	Not applicable
<b>Toddler(1- 3 years of age)</b>	2 hours	4 hours	6h	6 hours	8 hours
<b>Children(3-12 years)</b>	2 hours	Not applicable	6h	6 hours	8 hours
<b>Adolescents(&gt;12 years)</b>	2 hours	Not applicable	Not applicable	6 hours	8 hours
<b>Clear Liquids</b>	Only sips of water, Apple juice—max 200 ml				
<b>Light meals</b>	Include plain bread or rice, dry cereal, cooked vegetables or potatoes. Does NOT include any fatty or fried foods				
<b>Solid foods</b>	Include items part of your regular diet, gum, candy, or mints. Includes any fatty or fried foods				

### Medications on the day of surgery      Pre-operative assessment

If your child has to take medication on the day of surgery (if recommended by surgeon or anesthetist), please give it with a small sip of water or apple juice at least 2 hours prior to scheduled surgery time.

When you are admitted to ward, you will be greeted by a nurse who will check your child's temperature, heart rate and blood pressure, and review questions about his/her health. Your child will be given a hospital gown and an ID bracelet to wear. You will be seen by a pediatrician/

To make sure that you understand the procedure, you will be asked to sign an informed consent on behalf of your child (if you haven't already signed earlier). An intravenous cannula will be required for surgery. In most cases we do it in ward or during induction of anesthesia. Investigations, if required before surgery, will be sent now.

While you are in the pre-operation area, you may be asked the similar/identical questions several times. Please do not be alarmed. This is our way of ensuring patient safety.

### **Shifting to the Operation Theatre**

Your child will be shifted to the OT ( first or second floor)with a staff member. We try to follow our surgical schedule as closely as possible; however, unexpected delays may occur. We appreciate your patience.

### **Accompanying your child into the preoperative holding area**

In order to reduce anxiety, we allow one parent or caregiver into the pre operating room.

This is to ensure that the child is comfortable and feels secure in parental presence. Accompanying child to the operating room is not allowed .At entrance of OT, the guard will give you clean gown, cap, mask and shoe cover. The pre-operation area is on left side ( check the signage) from the entrance. The nurse and anesthetist team will again reconfirm the plan( sign in) and they will ask you about your child surgery. Please do not be afraid. As mentioned earlier, this is just routine to prevent errors and for proper identification of each and every patient.

### **Waiting during your child's surgery**

While your child is our responsibility during his/her surgery, we insist that you can eat and drink during this time at the cafeteria located on both upper and lower Ground floors. This helps you be by your child's side after the surgery for a couple of hours without any interruptions.

### After surgery

Your child will be brought to the Post-operative area or shifted to the Pediatric ICU, as per plan, by the Anesthesia team. You will be notified about it well in advance. Post operation area is on right side of operation theatre entrance. Again guard will guide you and will provide clean gown, cap, mask and shoe cover . Kindly check the signage for same. We want that the child sees one parent in front of him/her when he/she opens eyes after the surgery. We allow only one parent with the child till the child is shifted to his/her room.

### In Post operative area /Recovery room

- Your child may be given oxygen and will be monitored. This is standard procedure.
- Your child may look pale or slightly swollen. This is normal and will eventually subside.
- Your child may have slight pain or discomfort but that will be take care.
- Your child may have nausea and feel sick which is normal

side effect of anesthesia. We pre-empt medication to minimize this side effect.

- The child may feel dizzy or light-headed. It is best to leave him/her undisturbed and sleep in the recovery room.
- Your child may experience some sore throat which goes away in a few hours to a couple of days.
- We will do our best to ensure safety and comfort for your child during his/her recovery.

### Post-operative pain

After surgery, pain relief will be provided in a variety of ways. Pain relief is a team approach in which you, the surgeon, the anesthesiologist and the nurses will decide what is best for your child.

### Shifting back to ward

Recovery time varies from patient to patient, depending on the type of procedure, the patient's condition, and the anesthesia that was used. Before leaving the Post operative area, your child will need to be awake, breathing normally, and feel comfortable.

### In the ward

The decision to provide food or withhold it, will depend upon the surgery done on your child. The ward nurse will have appropriate instructions given by the surgeon and anesthesiologist. If orally allowed, you will be provided appropriate food for the child by the dietician. Otherwise, IV drip will continue. You will be informed in advance of what is best for your child.

### Discharge instructions

Your child's discharge instructions will be given by a doctor and explained by a nurse before going home. Then you will be directed to ground floor for final

billing (IP billing), which will be explained thoroughly to you by the Billing executive/Floor Manager. In case of TPA, whole process of discharge takes approximately 6-8 hours. On the way home, we recommend that an adult sit beside young children in the car. Position your infant/child with his/her chin off the chest. During the ride home, check your child frequently to make sure he/she is breathing without difficulty. When your child is sleeping, you should be able to awaken him/her easily. Older children can become nauseated in the car on the way home; keep a plastic bag just in case your child vomits.

## Notes