Fast Facts about Anesthesia and Pediatric Dentistry

- Your child’s dentist will recommend general anesthesia to perform dental treatments only if it is needed.
- Your child will sleep through the entire duration.
- When anesthesia is needed, there are special rules for eating and drinking at home before the procedure.
- You should plan to stay at the recovery room until the anesthesia has completely worn off and it is safe for your child to go home.

General Anesthesia

To keep your child safe and comfortable during a dental procedure, your child’s dentist might decide to use general anesthesia in the operating room. General anesthesia also may be used if your child needs extensive or complicated procedures that will take a long time to complete, or needs several procedures done all at the same time. A pediatric anesthesiologist - a doctor who specializes in anesthesia for children - will give your child the medications that will make him or her sleep soundly during the procedure.

General anesthesia makes your child’s whole body go to sleep. It is needed for certain dental procedures and treatments so that his or her reflexes will be completely relaxed. Your child will feel no pain during the procedure, nor have any recollection.

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. The nurse will give you specific dietary instructions for your child based on your child’s age.

For infants under 12 months:
- Up to 6 hours before the scheduled arrival time, formula-fed babies may be given formula.
- Up to 4 hours before the scheduled arrival time, breastfed babies may nurse.

For all children:
- 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.
- 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.
- 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.
What to expect

Once your child has been registered for the procedure, 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 your child should receive.
- 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 about 10 to 15 minutes.
- If you wish, you may stay with your child as the sleep medication is given.
- Once your child has been taken to the operating room, a small mask will be placed over your child’s nose and mouth. The medicine that is directed into the mask will help your child relax and will make your child sleep.
- When your child has fallen asleep, you will be taken to the waiting room.
- Once your child is asleep, intravenous (IV) sedation will be started so that medication can be given to keep him or her sleeping throughout the procedure. IV sedation requires a needle to be inserted into your child’s vein, usually in the arm or hand.
- During the procedure, your child’s heart rate, blood pressure, and other vital functions will be closely monitored.

How to Comfort Your Child

As a parent, watching your child undergo anesthesia may be a very uncomfortable experience for you. Children can sense a parent’s concern — so for your presence to be helpful to your child, you must try to be as calm and encouraging as possible. There are ways you can help your child, even if you feel uncomfortable.

- You can bring along a “comfort” item — such as a favorite toy, stuffed animal or “blankie”— for your child to hold during the induction.
- You can touch your child to remind your child that you are there. Holding your child’s hand or caressing his or her hair and face will remind your child of your presence.
- You can whisper, talk, or sing to your child. The sound of your voice can provide reassurance.

Important Things to Remember

- Even with a parent present, the operating room can be a scary place for a child. Do not feel bad if your child gets upset — even with you there to help.
- The main purpose of your presence at the induction of anesthesia is to help your child; therefore, your child’s safety is our primary concern. If you are asked to leave the room for any reason, you must do so quickly and quietly. The medical staff needs to focus their full attention on your child.
- If you feel uncomfortable and are unable to stay in the room during induction, please tell one of the medical staff. You will be guided to the waiting room.
**Following General Anesthesia**

Once the procedures have been completed, your child will be taken to the recovery room where nurses will carefully check his or her vital signs. The effects of general anesthesia can last for many hours.

- Your child’s nose, mouth, and throat may remain numb for 30 to 45 minutes after the procedure.
- Your child’s throat may remain slightly sore for 1 to 2 days after general anesthesia.
- Your child’s gums and mouth may be sore for several days afterward, depending on the dental procedure.
- Use caution when your child eats and drinks for about 30 to 40 minutes after the procedure.
- Your child may feel dizzy.
- Give your child only soft foods for the first few hours after undergoing anesthesia.

**At-Home Care and Follow-Up Visits**

- Your child is not to return to school or day care that day, and you may need to see how he or she feels the next day. Sometimes the effects from general anesthesia — usually tiredness — can last into the next day. Your child will need to remain at home where an adult can monitor him or her.
- Upon returning home, your child may only have minimal activity for the remainder of the day.
- Your dentist will tell you when you should schedule a follow-up visit.

**When to Call the Dentist**

If your child’s gums are sensitive, Tylenol® or Motrin® will help with any discomfort. If your child experiences the following for more than 24 hours following dental surgery done with anesthesia in the operating room, you should call the dentist:

- fever
- severe bleeding of the gums
- severe pain
- severe vomiting or dizziness