Pre-operative fasting practice

NIL BY MOUTH MEANS WHAT? PUTTING EVIDENCE INTO PRACTICE, A PROSPECTIVE PRE-OPERATIVE FASTING AUDIT

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An audit was conducted to assess the duration patients are fasted for and patient understanding of pre-operative fasting instructions.

Pre-operative fasting is a pre-requisite for every surgical procedure done under general anaesthesia. This is important as it decreased gastric acid content, gastric reflux, and reduces risk of aspiration. It was observed in the general surgical department that patients were fasting for longer than necessary. This could lead to dehydration affecting the ability to cope with surgical stress response and potentially delaying or complicating postoperative recovery. The aims of this audit were to assess pre-operative fasting times and patient understanding of pre-operative fasting instructions.

A prospective audit was conducted over a 4 week period. Adult patients on both CEPOD and elective lists were included. Patients on total parenteral nutrition were excluded. Data was retrieved from a comprehensive patient questionnaire, anaesthetic pre-operative document and drug charts. Questionnaires included last time patient consumed solids or liquids and pre-operative information provided.

Total sample population was 47 patients, 23 elective and 24 CEPOD patients. Mean duration patients fasted for solids was 20 hours (standard of 6 hours) and for liquids 8 hours (standard of 2 hours). CEPOD patients are fasted for longer compared to elective patients. 23% of patients were encouraged to drink until 2 hours before surgery. 21% of patients were given pre-operative advice on chewing gum and smoking, of which one patient received correct advice. Common pre-operative fasting instructions include nil by mouth from midnight, to only have sips of water after midnight, and only take water 2 hours before operation. Incorrect information was found to be stated on the trust patient advice leaflet.

Results of this audit were discussed at the general surgical, as well as, anaesthetic departmental meeting. Training on pre-operative fasting to frontline healthcare professionals was provided, and an information poster for the ward developed to raise awareness of up to date pre-operative fasting guidelines. Fluid fasting policy is in the process of being changed to 1 hour for patients admitted electively to the assessment unit. A re-audit will be performed using similar methodology, in addition to assessment of aspiration events post-policy change. A reduction in pre-operative fasting times is anticipated.