



Reducing fasting times in paediatric surgical patients: "The Ticking Clock"

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BACKGROUND

- · Nursing staff frequently highlighted concerns that patients were fasted longer than necessary.
- Preoperative fasting guidelines protocol" at NMUH recommend:
 - · Stop solid foods 6 hours before surgery
 - · Stop breastfeeds 4 hours before surgery
 - · Stop clear fluids 1 hour before surgery
- AIM: To reduce the time paediatric surgical patients spent fasted unnecessarily through a quality improvement initiative that provided healthcare staff with a tool to review fasting times regularly

METHODS

- Fasting times of paediatric emergency surgical patients admitted over a 2 week period (Oct 2018) were obtained and discussed with paediatrics and surgical department
- A new proforma "The Ticking Clock" was introduced to try and reduce fasting times.
- Nurses were educated about the new intervention to help implement the change
- Data collection was repeated six months later.

TICKING CLOCK PROFORMA

RESULTS

- Initial data was collected for 14 surgical paediatric patients
- Repeat data collection included 10 patients
- Average total time spent fasting:
 - Before intervention: 14 hours 48 mins
 - After intervention 7 hours 13 mins

After intervention Before intervention Duration spent NBM from time in Duration spent NBM from time in recovery until first sip/food recovery until first sip/food Max = 19Max = 5 hourshours 12 mins 30 mins Median = Median = 3h 15 min 2 hours Min = 1 hour 24 mins Min = 1 hour Duration spent NBM before operation Duration spent NBM before operation start time start time Max = 9Max = 18hours hours 18 16 Median = 3h 50Median = 9h 12 min mins Min = 2 hours Min = 2 hours 24 mins 30 mins

Paediatric Surgery Ticking Clock (for Non-Elective Paediatric surgical patients) To be completed by nurse looking after the patient Agreed time for surgery What time must the child stop having solid food? (6 hours before theatre) What time must the child stop drinking clear fluids? (1 hour before What time are IV Fluids started? MORE THAN TWO HOURS SINCE LAST DRINK? **RESET THE** CLOCK STOP THE CLOCK LAST SOLID FOOD (NEW TIME): LAST CLEAR FLUIDS (NEW TIME): HAS A DEFINITE PLAN FOR SURGERY BEEN MADE? AGREED REVISED TIME FOR OPERATION: DISCUSS WITH SURGICAL TEAM BLEEP: ASK: 1) CAN WE RESET THE CLOCK? YES/NO 2) CAN THE CHILD HAVE A CALL THEATRE AND FIND OUT DRINK? YES/NO TIME FOR SURGERY 3) CAN THE CHILD EAT? YES/NO OR SPEAK TO ANAESTHETIST FOR EXPECTED TIME

SUMMARY

- "The Ticking Clock" significantly reduced the average time paediatric surgical patients spent fasted by 50%
- "NBM" as a term should be avoided and Distinction between times for last solid food/clear fluids should be written
- Limitations: Small sample size, subjective effect on patient experience not explored