



**Sip Til Send
Simple. Safe.
Kind.**

**The end is in sight for
prolonged pre-
procedural fluid fasting.**

Fasting sequelae

- ▶ Assoc with
 - ▶ Hunger
 - ▶ Thirst
 - ▶ Nausea
 - ▶ Anxiety
 - ▶ Hypoglycaemia
 - ▶ Hospital acquired malnutrition
 - ▶ Post operative cognitive status
- ▶ Complaints
- ▶ Code blacks





NSW GOVERNMENT | Health South Eastern Sydney Local Health District

THE PRINCE OF WALES HOSPITAL

SIP TIL SEND

FLUID INTAKE BEFORE ANAESTHETIC

Before anaesthesia patients can drink clear fluids including:

WATER	APPLE JUICE	BLACK TEA/COFFEE (NO MILK)	ELECTROLYTE SOLUTION	ICE

Patient can sip continuously up to **200ML (1 CUP) PER HOUR** (every hour) until the patient is called to theatre.

EXCEPTIONS

ANY PATIENT WHO IS NIL BY MOUTH FOR MEDICAL OR SURGICAL REASONS

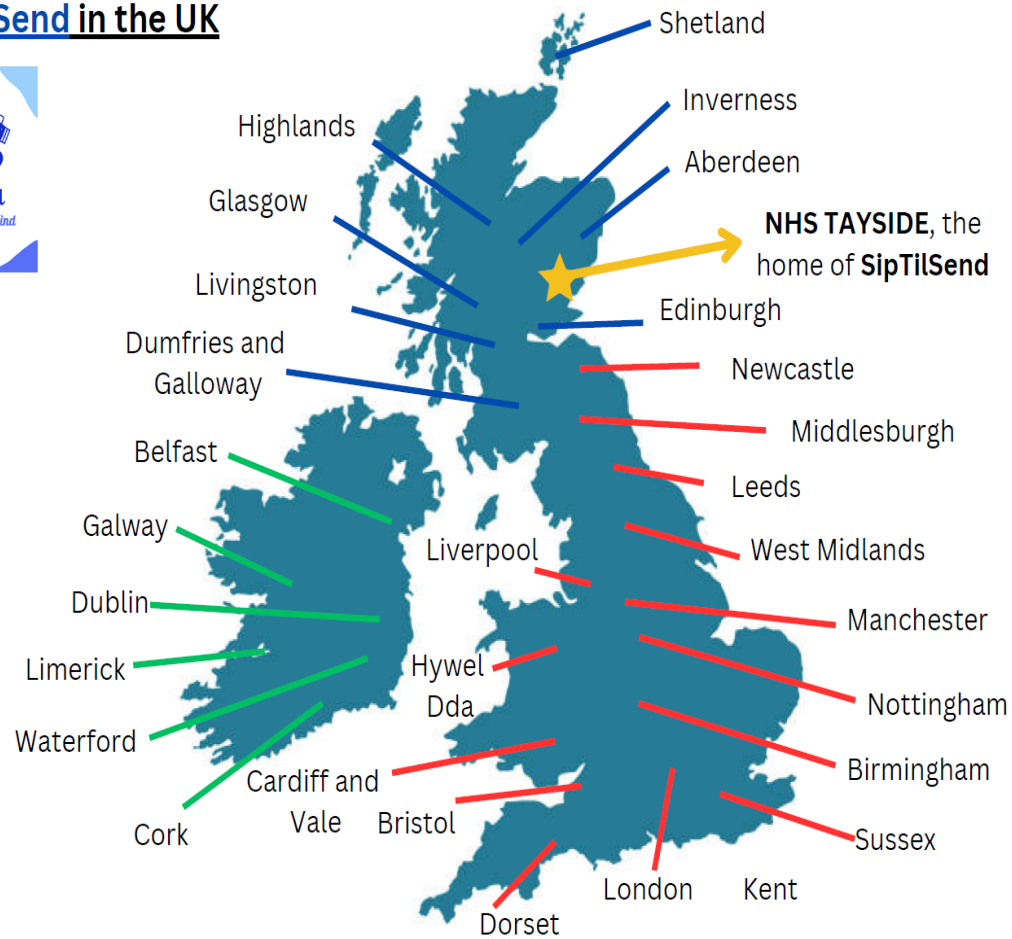
These patients can moisten their mouth and lips with water.

All patients should be encouraged to 'Sip Til Send' but not forced to do so if they aren't feeling well.

Sip Til Send - Background



SipTilSend in the UK



Sip Til Send



▶ What is it?

- ▶ A new approach to preoperative drinking
- ▶ Patients can continue to sip clear fluids until sent to theatre
- ▶ Avoids prolonged periods of fasting
- ▶ Keeps patients hydrated before theatre
- ▶ Staying hydrated helps patients feel better
- ▶ Reduces headaches, nausea and anxiety

▶ What you need to know

- ▶ Encourage patients to sip from one 200mL cup of clear fluids refilled every hour
- ▶ Paediatrics 3mL/kg/hr up to a max of 200mL
- ▶ Clear fluids include:
 - ▶ Water
 - ▶ Clear apple Juice
 - ▶ Diluted Cordial and Electrolyte Solutions
 - ▶ Black tea/coffee - **No Milk**

Paediatric Protocol



- ▶ **3ml/kg (up to a maximum of 200ml)** hourly until called to theatre
- ▶ **Clear fluids include:**
 - ▶ Water
 - ▶ Clear apple juice
 - ▶ Lemonade ice-block
 - ▶ Hydralyte
 - ▶ Glucose 5% solution
- ▶ Children are encouraged to Sip Til Send but not forced to do so if they aren't feeling well
- ▶ Children who are NIL by mouth for medical or surgical reasons can moisten their mouth and lips with water

Exclusions

- ▶ Any patient who is Nil By Mouth for medical or surgical reasons
 - ▶ E.g. Stroke, bowel obstruction
- ▶ These patients can still moisten their mouth and lips with water
- ▶ ***Sip Til Send is the default*** approach for all patients
 - ▶ *If a patient requires different instructions their anaesthetist will document in the clinical record*



Solids



Instructions for **Solids** have not changed.

Patients should not eat for **6 hours** before their anaesthetic.

Solids include thickened fluids, broths and sweets/lollies (even if only sucking them).

Instructions for Doctors



Please DO NOT advise “NBM”

(Unless clinically indicated and excluded from Sip Til Send)

Please use:

“No solid food 6 hours before surgery. Can Sip Til Send”

“ No solid food from 2am. Can Sip Til Send”



Why do
we need
to
change?

History of preoperative fasting

- ▶ Mendelson – Obstetric anaesthesia
 - ▶ 44,016 pregnancies
 - ▶ Ether or nitrous oxide (not intubated)
 - ▶ 66 Aspiration – chemical pneumonitis (66/44016, 0.15%)
 - ▶ 2 deaths – solid food blocking the airway
 - ▶ Remaining recovered 36hrs

- ▶ Fasting seemed a 'good idea'...Fasting recommendations persisted
 - ▶ Maltby RJ. Fasting from midnight - the history behind the dogma. *Best Practice and Research in Clinical Anaesthesiology* 2006; 20: 363-78.
 - ▶ McCracken JC, Montgomery J. Postoperative nausea and vomiting after unrestricted clear fluids before day surgery. *European Journal of Anaesthesiology* 2018; 35: 337-42.
 - ▶ Mendelson CL. The aspiration of stomach contents into the lungs during obstetric anesthesia. *American Journal of Obstetrics and Gynecology* 1946; 52: 191-205.



Gastric Emptying

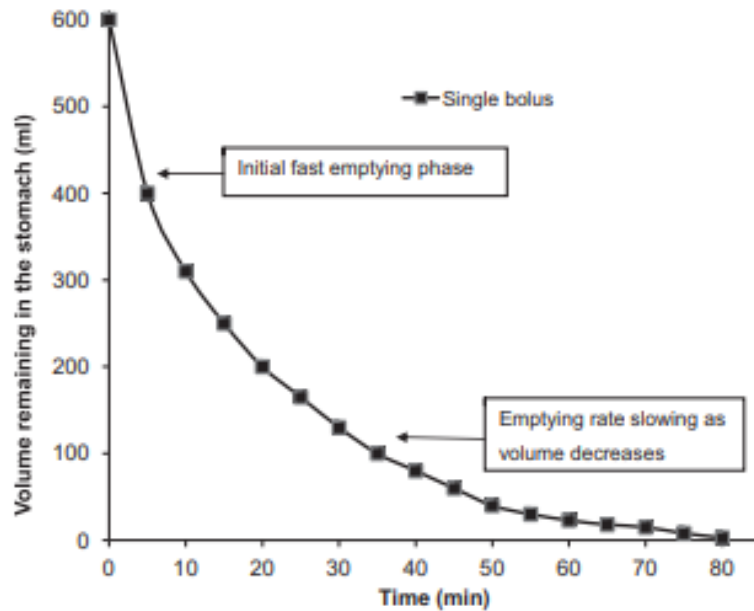


Figure 1 Typical gastric emptying pattern following ingestion of a single bolus of a dilute carbohydrate-containing beverage.

- ▶ Fluid is prokinetic
- ▶ Immediate and exponential
- ▶ T1/2 10-15mins
- ▶ Prolonged fluid fasting does not equate to smaller gastric volumes
- ▶ Prolonged fasting may increase gastric volume

- ▶ Cochrane 2003
- ▶ Wilson GR et al Starvation before surgery: is our practice based on evidence?, *BJA Education* 2017 Aug;17(8):275-282
- ▶ Fawcett WJ et al Pre-operative fasting in adults and children: clinical practice and guidelines, *Anaesthesia* 2019 74, 83-88
- ▶ Morrison CE et al Two hours too long: time to review fasting guidelines for clear fluids. *Br J Anaesth.* 2020 Jan
- ▶ Leiper et al. *Nutrition Reviews* VR Vol. 73(S2):57-72

Fasting Guidelines



ANZCA Guideline 2022

HNELHD Guideline 2023



Fasting Guideline for Patients undergoing Anaesthesia and Sedation

Sites where Guideline and Procedure applies	All HNE Elective Procedural Waitlist Sites
This Guideline and Procedure applies to:	
1. Adults	Yes
2. Children up to 16 years	Yes
3. Neonates – less than 29 days	Yes
Approval received from the Clinical Network Manager, CYP&F 25 June 2023	

Appendix 1 - Fasting guideline

This fasting guideline applies to patients undergoing general anaesthesia, major regional anaesthesia/analgesia and sedation.

The aim of fasting prior to anaesthesia or sedation for a surgical or medical procedure is to decrease the risk of perioperative regurgitation, which may result in aspiration syndrome. This may be associated with chemical



John Hunter Hospital Fasting Audit Results



Nutrition Audit

- ▶ JHH June - Dec 2022
- ▶ 188 Patients with hip fracture awaiting surgery
- ▶ Mean Fasting Time for fluids 22.9 Hours
- ▶ 98/188 (52%) patients fasted for 2 or more days

▶ *Karolina Kanczuga-Byszewski*

Retrospective Audit

- ▶ JHH June 2020
- ▶ 100 patients awaiting emergency surgery
- ▶ Minimum clear fluid fasting time 1.9 hours
- ▶ Maximum 40.7 hours.
- ▶ 1/5 of patients fasted for multiple successive days

▶ *Dr Rachel Ng, Dr Trista Valk*

New Directive



▶ Clinical Excellence Commission and HNE Health

- ▶ implement 'Sip to Send' protocols in elective surgical patients to minimise need for intraoperative IV fluid requirements.

▶ ANZCA

- ▶ If protocols exist, Sip Til Send may be considered.

Go Live Date



Sip Til Send will commence at
The John Hunter Hospital &
John Hunter Children's Hospital
On **3rd September 2024!**

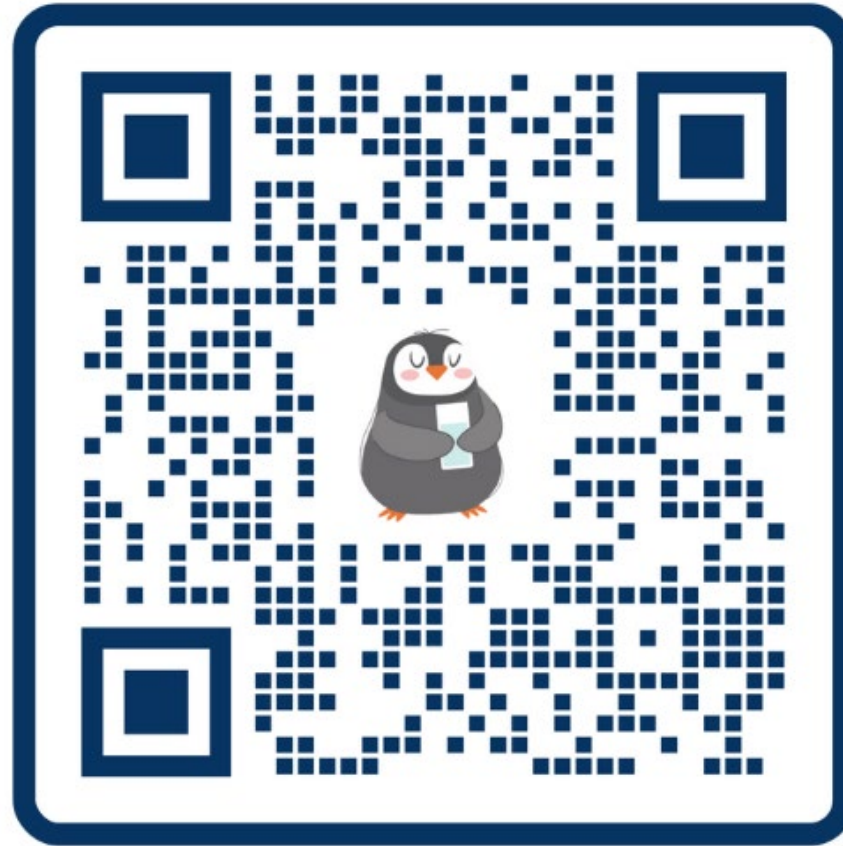
Summary



Sip Til Send will go live on 03.09.2024!

- ▶ **'Sip Til Send'**
 - ▶ Reduces fluid deprivation times by allowing patients to sip clear fluids until they are sent to theatre
 - ▶ Is unlikely to increase in aspiration risk.
 - ▶ Improves patient comfort and satisfaction
 - ▶ May contribute to reduced requirements for IV Fluids
 - ▶ Aspiration risk should continue to be assessed individually, with anaesthetic plans tailored accordingly.

QR Code – Resources



Contact

Dr Lynn Chan

Anaesthetist

▶ Phui.Chan@health.nsw.gov.au

Dr Erica Epstein

Geriatrician

▶ Erica.Epstein@health.nsw.gov.au



Questions?

