NPO GUIDELINES

For uncomplicated cases:

- Clear Liquids 2 hours
- Milk 6 hours
- Light Meal-6 hours
- Fatty Meal 8 hours

Other factors:

- Trauma, opiates, diabetes, renal failure slow gastric emptying
- Chewing gum does not affect gastric volume
- Water and black coffee only remain 20-30 minutes in stomach

Recommendations

Recommendation	Strength of Recommendation	Strength of Evidence
We recommend healthy adults* drink carbohydrate-containing clear liquids† until 2h before elective procedures requiring general anesthesia, regional anesthesia, or procedural sedation. The carbohydrates may be simple or complex.	Strong	Moderate
There is insufficient evidence to recommend protein-containing clear liquids preferentially over other clear liquids before elective procedures requiring general anesthesia, regional anesthesia, or procedural sedation (no recommendation).	Not applicable	Very low
3. We suggest not delaying elective procedures requiring general anesthesia, regional anesthesia, or procedural sedation in healthy adults* who are chewing qum.‡	Conditional	Very low
4. There is insufficient evidence concerning benefits and harms to recommend pediatric patients drink clear liquids until 1 h versus 2 h before procedures with general anesthesia, regional anesthesia, or procedural sedation (no recommendation).	Not applicable	Very low
5. To avoid prolonged fasting in children, efforts should be made to allow clear liquids in children at low risk of aspiration as close to 2h before procedures as possible. In children with shorter clear liquid fasting duration, exercise clinical judgment.	Best practice statement	Not applicable

*Individuals without coexisting diseases or conditions that may increase the risk for aspiration, including esophageal disorders such as significant uncontrolled reflux disease, hiatal hernia, Zenker's diverticulum, achalasia, stricture, previous gastric surgery (for example, gastric bypass), gastroparesis, diabetes mellitus, opioid use, gastrointestinal obstruction or acute intraabdominal processes, pregnancy, obesity, and emergency procedures. Exercise clinical judgment with this patient population. †Up to 400 mL of clear liquids is considered an appropriate volume. Trial participants ingested a median of 400 mL of carbohydrate-containing clear liquids (interquartile range, 300 to 400 mL) up to 2h before anesthesia administration. ‡Chewing qum should be removed before any sedative/anesthetic is administered.



Eur J Anaesthesiol 2016; 33:457-462

ORIGINAL ARTICLE

Black or white coffee before anaesthesia?

conclusion The study provides evidence that adding up to 50% full fat milk to coffee leads to no or only a minimal increase of the gastric volume 2 h later. The results support a liberalization of policy on the addition of milk to hot drinks before planned anesthesia.