**Oral Intake Policy**

**ORAL INTAKE POLICY:**

Review of the literature suggests that oral intake of clear liquids during labor is safe and beneficial for all patients. The risks of failed intubation and aspiration are exceedingly low and clear liquids are emptied from the stomach relatively quickly, even in obese parturients. The energy demands of labor have been compared to those of an endurance athlete. Ketosis from lack of energy substrates during labor has been demonstrated in laboring patients although in otherwise healthy women, there are no clinically significant harmful effects from this ketosis. Patient satisfaction with their labor experience is enhanced when they are allowed to drink during labor. Furthermore, most patients self-limit the amount of fluids they consume so we do not need to worry about patients drinking gallons of clear liquids during labor.

For **elective surgical patients**, there is extensive evidence to suggest that ingesting clear liquids up until two hours before the procedure actually improves gastric emptying and does not increase the risk of aspiration. In addition, there is a new push towards “enhanced recovery” in certain surgical patients that demonstrates earlier return to bowel function and other benefits post-operatively when patients consume a carbohydrate drink (i.e. Gatorade) 2 hours prior to their surgical procedure. Patients at our Ambulatory Center are allowed clear liquids up until three hours prior to their scheduled surgery and are encouraged to include drinks with sugar (unless they are diabetic). Although there is not a lot of literature for scheduled c/section patients, there is no reason to believe that these same benefits would not apply to our patients as well. Pregnancy, in and of itself, has not been shown to decrease gastric emptying.

**Definition of Clear Liquids:**

Water, Apple Juice, Ginger Ale, Sprite/7 Up, Lemonade or Ice Tea (no Pulp), Gatorade/Powerade, Jello, plain lollipops or lifesavers. For diabetics: similar types of sugar-free drinks. Coffee or tea without milk is also an option for laboring patients

**Oral Intake Policy for Labor:**

**Patients may have ad lib clears (defined above) throughout labor.**

Drinks with some sort of carbohydrate/ sugar content should be encouraged as part of the clears in non-diabetic patients. No solid foods or non-clear liquids are allowed.

**Once the decision has been made to perform a c/section, the patient should immediately be NPO, including ice chips.**

**Oral Intake Policy for Scheduled Surgical Procedures on Labor and Delivery:**

Our patients are instructed to arrive two hours before their scheduled surgery. Patients should be instructed that they may have ad lib clear liquids (defined above excluding coffee and tea) until three hours prior to their scheduled c/section or other procedure. They should be told to have their last drink (8-12 oz) when they wake up (for the morning cases who presumably will not be up all night drinking) or before they leave their house (for the afternoon cases) and this should preferably be a carbohydrate rich drink such as Gatorade or apple juice, not just water. Any type of clear sugar-free drink is acceptable for diabetics.

There is no change in our oral intake guidelines for food or other non-clear beverages. Patients should be NPO for these items for 8 hours.

Coffee and tea are not included as options for the scheduled surgical patients. I was warned by some of my colleagues that this could be fraught with problems as some patients will use milk anyway and this may result in delay of the case.

Technical issues:

1. Everyone who is involved with giving instructions to scheduled surgical patients on L&D must be aware of the new changes so that patients do not received conflicting information.
2. The admission orders for laboring patients will eventually need to be changed to specify a clear liquid diet. For the time being, the NPO box can be unclicked and a clear diet can be ordered by the OB resident/midwife/attending.
3. A standard Stony Brook clear liquid tray contains some items that are not on our list so the nurses would have to request only our approved clear liquids. It is possible that we can design our own specific clear liquid tray for laboring patients, I will need to discuss this with dietary.

**These new Oral Intake Guidelines are effective immediately. Please contact the anesthesia team if you have any questions.**