Introduction: Preoperative anxiety in children is common and can be associated with adverse clinical outcomes such as increased analgesic requirements and emergence delirium. Some children may require a GA for emergency surgery that is life saving or that cannot be postponed to a future date. In these cases time is limited and a crying restrained child may be necessary to proceed with the emergency surgery. However, the ethical dilemma is raised with the well elective patient and therefore should pre-medication play a greater role in the anaesthetic requirements in this population. The Royal College of Anaesthetists suggest that 75% of children aged 1-5 years should pass through the anaesthetic induction room without crying or needing restraint.

Aim: The aim of our study was to take a snapshot of paediatric patients from 1-5 years old undergoing elective surgery and to see if our department was meeting the target figure of 75% suggested by the Royal College of Anaesthetists.

Methods: A prospective data collection was undertaken in our department from September 2016 to November 2016. Over this 3 month period we audited our department’s practice of induction. A questionnaire was completed at the time of induction by the lead anaesthetist.

Results: Data was collected on 50 patients in this 3 month period. The mean age and weight of the patients were 2.68 years and 16.5 kg respectively. 60% of the patients were male. 36% of the patients cried at induction and almost the same were restrained at 32%. The children were more likely to be accompanied by their mum overall. 72% of patients were undergoing their 1st GA. Only 1 child received premedication with oral midazolam and this child had special needs. 12% of patients in total had special needs. Multiple specialties were included with ENT being the most common procedure performed at 66%.