HOW TO PREPARE YOUR CHILD FOR PAINFUL PROCEDURES:

Please ask your health care provider to fully explain any unfamiliar procedure. Your health care provider will usually ask you if you wish to be with your child during a procedure. This may be a hard decision. While we usually like parents to be with their children to offer comfort, choosing to wait outside is okay too.

SOME THINGS TO REMEMBER WHEN PREPARING YOUR CHILD FOR PROCEDURES:

- Be honest, confident, and positive about what is going to happen.
- Try to describe things in ways your child can understand and in terms of what he or she will feel, hear, see, and smell.
- Never even hint or joke about the procedure happening because they have been bad.
- Give your child some say in 'how', not 'what' things can happen.
- Let your child know it is okay to cry but that everything will be over quicker if he/she holds still.



IF YOUR CHILD IS HAVING SURGERY:

Depending on the type of surgery, your child may be taken to the recovery room following surgery until his/her heart rate, temperature, blood pressure and oxygen saturation are stable. After your child is drinking well without vomiting and has gone to the bathroom, he or she may then be moved to another area.

WHAT TO DO FOR YOUR CHILD AFTER SURGERY:

After your child goes home, follow your health care provider's instructions. Give pain medicine as soon as the pain starts. Some medicines need to be given around the clock. Be sure to call your health care provider if the medicine does not seem to help the pain.

In addition, be prepared to answer the following questions:

- Does your child have a fever?
- How severe is the pain based on your child's selection on the pain scale (o to 1o)?
- If there is a wound or surgical area, does it look clean and dry or red and oozing?

MY PAIN CONTROL PLAN

BEFORE SURGERY Medications:
Non-Drug Pain Methods:
Activities:
Instructions:
AFTER SURGERY Medications:
Non-Drug Pain Methods:
Activities:
Instructions:
AT HOME Medications:
Non-Drug Pain Methods:
Activities:
Instructions:
If I have concerns with my pain management I should call: Health Care Provider/Clinic:
Phone Number:

GOOD PAIN MANAGEMENT IS A TEAM EFFORT!

REMEMBER TO:

- Participate in your child's recovery and plan of care.
- Communicate with your health care providers.





OUR PAIN MANAGEMENT BELIEF FOR YOUR CHILD:

We believe that infants and children have a right to the best pain relief that can be safely provided.

YOUR ROLE IN THE PAIN MANAGEMENT PROCESS:

Your child may be having pain from surgery, procedures, or an illness. Your health care providers will be doing everything they can to keep your child comfortable. Feel free to talk to us about your child's care. Ask questions. Share with us what you feel is or is not working and your ideas to make your child more comfortable. You can help us help your child by telling us:

- How does your child's behavior change when he or she is sick or having pain?
- What works to comfort your child?
- How does your child describe his or her pain?
- How does your child react to painful or stressful situations?

If you are a new parent or this is your child's first illness you may still be learning how he or she acts when sick or in pain. Even parents with older children may be unsure how to judge their child's pain level.

The following are some behaviors, by age level, which we look at to assess your child's pain.

MANAGING YOUR CHILD'S PAIN



INFANTS:

CRY: Does your baby have a screaming cry? Can he or she be distracted from crying?

FACIAL EXPRESSIONS: Is your baby calm and relaxed or grimacing and furrowing his or her brow or face?

SLEEPING: Are there changes in your baby's sleep pattern when he or she is unable to sleep or taking only very short naps (5-10 minutes).

SUCKING: Is your baby unable or too frantic to suck or is sucking in short bursts and then starts to cry again?

BODY TONE AND POSTURE: Does your baby appear relaxed or tense all over?

CONSOLABLE: Are you able to console your baby? How difficult is it or how long does it take to comfort your child compared to normally?

EYE CONTACT/SEARCHING: Does your baby make eye contact or look toward your voice? How easy, difficult, or impossible is it to get his or her attention?

TODDLERS AND PRESCHOOL CHILDREN:

FACIAL EXPRESSIONS: Is your child smiling, composed, or grimacing?

TALK: Can your child describe what is causing him to cry, moan, or scream? Is your child saying that a particular part of his or her body hurts?

INTERACTION: Is your child restless or irritable. Is he or she unusually quiet? Can you distract your child with toys or videos?

SLEEP: How is your child sleeping as compared to his or her normal pattern? Does your child have nightmares?

BODY: Can your child get comfortable in bed? Does he or she insist on staying in one specific position?

APPETITE: Is your child's appetite significantly decreased?

SCHOOL-AGED CHILDREN:

Your child may be able to talk more directly about the cause of pain, type and amount of pain. He or she may experience a change in activity level, eating or sleeping patterns.

HOW WE WILL ASSESS YOUR CHILD'S PAIN:

We will be assessing your child's pain in different ways based on age and development. If your child is having trouble with the number pain scale, ask us for help.

One of the frequently used pain assessment tools is the faces scale:

Wong-Baker FACES Pain Rating Scale



From Wong, DL, Hockenberry-Eaton M, Wilson D, Winkelstein ML; Schwartz P: Wong's Essentials of Pediatric Nursing, ed. 6, St. Louis, 2001, Mosby, p. 1301. Copyrighted by Mosby-Year Book, Inc. Reprinted by permission.

The range of pain goes from (o) No Hurt to (10) Hurts Worst. This range will help us determine what comfort goal needs to be established.

WHAT YOU CAN DO TO HELP:

Your child's pain experience can be affected by your reactions. Try to remain calm and positive.

- Let your health care provider know your child is in pain or if the pain has gotten much worse. Your health care provider will be able to give your child pain medication and possibly provide compresses, elevation, support rolls, or other comfort measures.
- Along with pain medications, there are other things you can do to help your child. Infants usually feel better when they are swaddled, rocked, sung to, given a pacifier, and even just placed in a different position. The sound of your voice and soothing music may help them. Your child may also benefit from gentle massage. If you would like to try massaging your child, first talk with your health care provider.
- Try to divert your child's attention from pain to another activity by offering his or her favorite toys, watching a video, playing games, or listening to music.