
Your Child's Surgery or Procedure

Developed by the health care professionals of the Department of Surgery with the assistance of the Department of Learning and Development .

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Hearing that your child needs surgery can be stressful for the whole family. We cannot remove all the anxiety, but the goal of the health care team is to make your experience as easy as possible. We believe that you know your child best. We will try to support your efforts to calm your child's fears and help him/her to grow stronger from the experience.

Bring this booklet to the hospital on the day of surgery.

1 Setting the Date:

Fill in your child's surgery date and time here when the hospital calls you.
Date:

Time:

Tip:
For everything you want to know about your stay at BC Children's Hospital, ask for a copy of **"Family Issues."** You can get a copy from the **Family Resource Library** at BC Children's Hospital.

The surgeon contacts the hospital to arrange the surgery and then gives you a date. The Hospital Admitting phones you about one week before this date to pre-register your child.

Many surgeries, dental treatments and tests are booked as **"Day Care Surgery"**. This means your child is able to return home on the same day.

"Admit Day of Surgery" patients come in on the day of the surgery and but go to a hospital bed for a time after the surgery.

If your doctor wants tests and measurements before the surgery, a nurse will call to set up a time for your child's **Preadmission Clinic** visit. A visit to the clinic shortens the hospital stay. It also allows efficient use of hospital beds. A nurse will call to set up an appointment for your child at the Preadmission clinic. More information about the Preadmission Clinic is on page 4.

Note: Please understand that the admission date may change. We must make changes when we do not have enough staff to offer good care.

2 The Week Before Surgery:

Tip: Children younger than 4 years do better with a shorter preparation, maybe two days ahead of time.

Start preparing and reassuring your child.

- **Find out as much as you can** about the procedure. If you know what to expect, you will be able to help your child better.
- **Be honest with your child** about what will happen. Your child may be angry or upset but, the truth builds trust in what you say. It gives the child a chance to work through some of the anxiety. It also allows you to reassure and support your child. Being honest does not mean you have to explain every detail and discomfort. When you talk to your child, explain what will happen in terms of:
 - what s/he will see, hear and feel;
 - what people will be there;
 - what s/he will be asked to do e.g. *“Hold out your arm, lie very still, curl up on your side”*.
- **Tell your child why the procedure is necessary**, for example, *“The doctor knows a way to stop the earaches. She is going to put little tubes in your ears. We won’t be able to see them but they will help you hear better and take the ache out of your ears.”*
- **Ask your child to tell you what s/he knows or fears.** *“What is an*

operation?” “Do you know how they do it?” Sometimes playing with dolls, medical toys and masks or drawing pictures is easier for children than telling. Talking about pictures or using stories is another way to help children deal with the new and strange. Children may need many of these activities.

Tip: These plans work best if you go over them a few times before the day. They work best if the adult uses a calm, soothing voice to reassure the child.

- **Discuss with your child what the hard parts of the procedure may be.** Will it be climbing onto the bed? Will it be the instant of the needle poke? **Plan some way of getting over this time.** You could plan to blow a huge bubble during the needle poke. (Bubbles will be available in the Operating room. Ask for them in the Day Care.) Or, you could agree to say *“1-2-3 ouch”* or *“Zin zin the medicine’s in!”*

Some children **use objects for comfort** - a favourite pillow or toy. Bring this to the hospital. Even if there is no object which works in this way, the child may like to choose a toy or charm to hold.

- **Don’t bribe or threaten**, for example, *“If you’re a good girl at the hospital, then I’ll _____!”* or *“if you don’t hold still, they’ll do it again!”* Your child may simply decide that the bribe is not worth it and panic about the threat.

There is a videotape that will help prepare you and your child. Please try to watch “*All About Your Operation*.” One section will help reassure your child. The section “*The Parent’s Role in a Child’s Surgery: Be Calm, Be Ready*” will show you what to expect. It is available in the Family Resource Library. It is also in some hospital clinics, surgeon’s offices, and public libraries.

Date for Clinic Visit:

Time:

Reminder - please bring:

- Immunization records
- List of medications your child takes
- BC Health Care Card

The Preadmission Clinic (PAC)

Not all children will be required to visit the PAC, however, if your doctor registers you with this clinic, a nurse will call you to make an appointment. The date and time can be written below. The clinic visit takes place two to seven days before the surgery. Out of town patients have their appointment on the week day before the surgery.

Tel.(604) 875-3447 Mon-Fri 8.00 a.m. to 4.00 p.m.

A parent or legal guardian must come with the child. The clinic visit will take from 1 to 3 hours depending on the number of tests needed. You may want to bring a snack and something to do while you wait. The clinic is in a very

small area. If at all possible please arrange child care at home for your other children.

On-site pay parking is available. You can buy a pass if you know you will be here for a week or longer. The Information Desk in the front lobby of the hospital will direct you to the clinic.

What Will Happen at the Clinic?

- The staff examine and measure such things as your child’s weight, height, blood pressure and pulse.
- The anesthetist explains the anesthetic to you and answers questions.
- If your child needs to see any other health care professionals, we arrange for this to happen on the day of the clinic visit.
- Your child has any tests or x-rays the surgeon needs.
- You can get answers to any questions or concerns. If you have information to share about your child, talk with your doctor or nurse during your clinic visit.

Before you leave you sign the **surgical consent**, unless you have done this in the doctor’s office. *Only a parent or legal guardian can give consent. An informed consent is a legal document that states that a procedure has been explained to*

3 The 24 Hours before the Surgery

you. Ask for a copy of Family Issues (Newsletter for families of patients admitted to the hospital). On page 3 you will find a guide to the kind of questions that will help you sign an informed consent. Ask as many questions as you wish before you sign.

A nurse from the Day Care Unit will call you one working day before the procedure. She will tell you when to arrive at the hospital.

If you don't receive this call, please phone (604) 875-2191 before 5:00 p.m.

Bring with you:

- The completed medical history form, if one was given to you.
- BC Health Care card.
- An empty bottle if you have a baby who likes a special nipple.
- Housecoat and slippers for your child (not essential).
- Loose fitting clothes for your child to go home in.
- Pillow and bed linen if a parent plans to stay overnight with the child.
- This pamphlet.

Your child should have a bath and hair washed. Please remove make-up, nail polish and jewellery.

When the words "clear fluids" are used they mean drinks you can see through: apple juice, ginger ale, sugar solution and water.
NOT clear fluids: orange juice, cola drinks, gelatin desserts (Jello™), broths (that contain fat) and milk.

Please make absolutely sure that your child follows the fasting instructions for his/her age group. An empty stomach is an important part of your child's safety during an anesthetic. If the child does not follow the fasting instructions the procedure may be postponed.

If your child has a rash, cold, fever, diarrhea or has been with someone who is infectious, call the doctor doing the procedure, or the daycare, before coming to the hospital.

Fasting Instructions:

Infants 12 months and under:

- can have formula, milk or solids until 6 hours before the time of the procedure.
- can have breast milk until 4 hours before the time of the procedure.
- can have small drinks of clear fluids until 2 hours before the procedure.
- Do not even give a sip of water after that.

Children 1 year and over:

Offer your child a healthy snack at bedtime but make sure that they have **no solid food** after midnight on the day before the procedure, then

- can have small amounts of breast milk, formula, or milk up to 6 hours before the procedure.
- can have small drinks of clear fluids up until 2 hours before the procedure.

4 On the Day of the Procedure

Come directly to the Day Care Unit 1H15 off the main lobby. Please arrive 1 1/2 hours before the time of the procedure. This gives us time to get ready. There are a lot of people and not much space in the daycare. Please help us to keep the area calm by making plans for your other children to stay home. It also helps if there are no more than two adults for each child.

In the Day Care:

- If a blood sample is needed, it is taken in the laboratory. This is usually done with a finger poke.
- Your child changes into a hospital gown but can wear his/her own underwear and housecoat.
- Your child can play in the play area while waiting, but you must stay with him/her. If your child is given a sedative, or needs some special treatment, s/he stays in bed or in your arms.
- The anesthetist will come and talk with you about the best anesthesia plan for your child.

Some children are proud to manage the OR experience on their own. Other children need the comfort of a parent until they are sedated enough to make separation easier. A sedative may be given to your child in the Day Care Unit or one parent may be allowed to come with your child into the operating room.

Please discuss this with the anesthetist. S/he is in charge of your child's safety and welfare in the operating room so will make the final decision. Please watch the video segment "A Parent's Role in a Child's Surgery: Be Calm - Be Ready". It explains what to expect in the OR and how to support your child.

If the decision is made for you to go into the operating room, you must put on a gown, cap and boots. Do this in front of your child so s/he is not frightened by the change. Explain "these are my special clothes for going into the operating room. You have your special clothes and the doctors have their special clothes too!"

In the Operating Room (OR):

If you are going into the operating room, a member of staff will go with you when the time comes. Once your child is settled on the OR table, the anesthetic is given through an intravenous needle or a mask. Going to sleep with an anesthetic is different from normal sleep. Children go limp very quickly. Their eyes may roll back and their body may jerk. Once your child is asleep (or before this if the anesthetist requests) someone will take you back to the day care waiting area. It is normal to feel

Tip:

If your child begins to act out:

- In a calm, quiet and slow voice, say again why the procedure will be done.
- Reassure that you are close.
- Explain that if the child helps it will go quickly.
- Encourage your child to use distraction or another coping plan. Bubble blowing or deep breathing work well for many children.
- Let the staff know what they can do to support your child.
- Plan something pleasant to do when it's over.

anxious watching your child go off to sleep. But, **if you feel faint or dizzy at any point, tell the staff right away.**

Be part of the team caring for your child in the OR:

- Focus on your child; talk, tell a story, sing, hold or touch. Do whatever keeps your child calm as you would at home. Be sure to praise the way the child is managing.

Waiting during the surgery:

- The staff in the Day Care Unit will show you where to wait. If you go for a walk or leave for a snack, tell the volunteer and write your name and where you are going on the communication board.
- If you are in your child's room, ask the unit clerk for a pager so that we can let you know as soon as you can join your child.

Some children go to the Intensive Care Unit (ICU) following surgery. If this is the plan for your child, details will be provided by the Day Care Nurse.

In the Post Anesthetic Care Unit (PACU):

After the surgery/procedure your child goes to the PACU. This unit is staffed with nurses trained to care for children recovering from an anesthetic or heavy sedation. While your child is unconscious, a nurse will give care to your child only. After your child wakes, the

nurse may divide attention between your child and one other.

You can be with your child as soon as the nurse has checked for any urgent medical needs. If you do not hear from us when you expect to, please ask for an update on your child's progress. We will keep you informed.

The safe recovery of your child is our first concern. The PACU is an area where staff must be able to respond quickly. A crowded space is not easy to move through. This is why we ask that only one family member is with the child. Your child may be confused and restless after the medication and surgery. Please keep the stretcher side rails up unless you have checked with your child's nurse. Stay near your child's bedside and respect the privacy of other patients and families.

Tip:
You can bring your child's favourite toy, pillow, or blanket into PACU. It will help your child feel secure.

You know your child best. If you see signs of thirst or other kinds of discomfort, tell your child's nurse. The nurse can give pain medication and other forms of comfort.

Some people find the sights and sounds in PACU upsetting. Please let the nurse know if you want to leave or are feeling faint.

6 Places to Stay if You are From Out of Town

Tip:
It is important to reserve your accommodation early, as these facilities are often fully booked well in advance.

The following places are reasonable and close to the hospital.

Heather House, 4500 Oak Street (604) 875-2298:

This hostel is on the hospital grounds. \$45.00 a room. \$5.00 extra for a rollaway cot.

Easter Seal House, 3981 Oak Street (604) 736-3475:

This hostel is walking distance from the hospital. \$18.00 per night per adult. \$7.00 for children under 18 years. Patients in treatment stay for free.

Ronald McDonald House, 4116 Angus Drive (604) 736-2957:

This facility is for families with a child who has a very serious medical condition needing a long hospital stay. \$12.00 per night per family.

The closest **hotel** is the Plaza 5000 at 12th Street and Cambie Street, (604) 873-1811 or toll free at 1-800-873-1811. A discount is offered to families of children who are hospital patients.

Social Work Department, (604) 875-2149 keeps a list of rooms in **private homes** or suites in the area. Prices vary.

See *Family Issues* "In the Vicinity"

For General Inquiries please call:

Surgical Day Care Unit
(604) 875-2191

or

(604) 875-2345 ext. 7225

Office Hours: 6.30am – 7.00pm

Family Resource Library
BC Children's Hospital
4480 Oak Street, Rm. K2-126
Ambulatory Care Building
Vancouver, B.C. V6H 3V4
Phone: (604) 875-2345 Local 5102
Or 1-800-331-1533 ext 2 (out of town).
Email: famreslib@cw.bc.ca
Web: www.cw.bc.ca/library

We welcome your suggestions to improve care. Send your comments or concerns to:

Gaylene Ray
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