

Sedation for procedures 0: for the Emergency Department



This fact sheet is for children having sedation for a procedure while in the Emergency Department at The Royal Children's Hospital.

Part One: About sedation

Sedation is a medicine given to children to make them feel sleepy and relaxed. This medicine can be given by mouth (drinking), breathing in a gas or by an injection into a muscle or a vein.

Reasons for having sedation

Your child may become distressed or have pain when having certain tests or treatments. Procedural sedation (sedation for procedures) aims to reduce your child's pain and anxiety. The sedation may make your child feel sleepy and relaxed, meaning the procedure can be performed with more ease and with less distress for you and your child. Your child may not remember the procedure at all or remember small amounts only. This is normal.

Permission to give sedation

As the parent or caregiver, you must give us consent for sedation. You need to understand the reasons for sedation and the following risks -

- We will carefully check your child's breathing and if required, we will give your child oxygen through a mask or breathing tube.
- Children may vomit. Very rarely, they may breathe the vomit into their lungs, which may need some specific treatment.
- They may need to be treated with extra medicines, such as antihistamines.
- For your child's safety, do not take your child home until staff tell you it is safe to do so. Expect to wait for an hour or more after the procedure.

About Ketamine

Ketamine is commonly used in Australian hospitals for sedation in children. When we give your child Ketamine, they get sleepy and do not remember what happened. There are some special features about sedation with Ketamine for you to know -

- It is given by injection into a vein.
- Your child may seem to be awake after receiving Ketamine.
- Your child may move and need someone to hold them still.
- Your child may drool more than usual.

Sometimes as your child wakes up, they may have some agitation, hallucinations or nightmares. These sensations usually improve if you comfort your child in a quiet and dark area until they are fully awake.

Part Two: Helping your child

Helping your child before the procedure

- Ask the doctor/ nurse to explain the procedure to you and to your child.
- Talk to your child about some ways to cope (for example - looking at an interactive book, using their imagination to be in a nice place, blowing bubbles).
- It helps not being too upset or nervous yourself as your child will notice this.

Helping your child during the procedure

- Having a parent (or another adult) who knows the child stay with them is usually helpful.
- The level in which you will be able to engage/involve your child will depend on how deeply sedated your child becomes.

Your child may need reminders of the coping methods you decided upon earlier. For example, "blow away the hurt." This sort of distraction is very helpful.

- Giving your child a sense of control with some simple choices is helpful. We can allow them to choose things they may like eg. music or video options and which finger the oxygen probe may be placed on.
- It is not helpful to allow your child to decide the exact moment the procedure is going to happen.

Helping your child after the procedure

- Remain with your child. They may not remember where they are or why they are in hospital.
- Focus on the good things your child did. For example "*you did a great job blowing away the hurt*".

Part Three: Care of your child on your way home and for the next 24 hours

Sometimes the delayed effects of the medicines may make your child a bit confused, sleepy or clumsy for the next 24 hours. You need to be extra careful in caring for and supervising your child for the next 24 hours.

- If your child falls asleep in the car seat, watch them to make sure that they do not have any difficulty breathing. DO NOT leave your child alone in a car seat or alone in the car.
- Let your child sleep. Children may go to sleep again after getting home from the hospital. Sometimes children may sleep more because of the sedation medicine.
- Check on your child's sleeping pattern the night after getting home. If their sleeping seems heavy or strange then wake them up gently. If you cannot wake them or something seems very wrong in their appearance or breathing, call an ambulance and return to the hospital immediately.
- Sometimes children may feel sick or vomit if they eat a big meal too soon after sedation. **Give your child clear liquids such as diluted fruit juice, icy poles, jelly, clear soup etc.**
- Supervise all playing and bathing for the next 8 hours after getting home. DO NOT let your child swim or use play equipment (bikes, monkey bars etc) that might cause an accident (for the next 24 hours).

Key points to remember

- Sedation is commonly used in children for procedures.
- You need to give consent before your child has sedation.
- Make sure you understand the reasons for and the risks of sedation.
- Be as open and honest as you can with your child about what is going to happen and it helps not to be too upset yourself.
- Look under "s" for sedation on the [Kids Health Info](http://www.rch.org.au/kidsinfo/factsheets.cfm?doc_id=3664&tabnav=s) (www.rch.org.au/kidsinfo/factsheets.cfm?doc_id=3664&tabnav=s) website for more factsheets on different types of sedation.

When to call the doctor

Please call the Emergency Department at Royal Children's Hospital (03 9345 6153) if your child:

- Vomits more than twice.
- Has strange or unusual behaviour.
- If you have any questions.

The name of the doctor who gave your child sedation is:

Dr _____

This factsheet was produced by The Emergency Department in consultation with the [Department of Anaesthesia](http://www.rch.org.au/anaes/pain/?doc_id=848) (www.rch.org.au/anaes/pain/?doc_id=848), the Royal Children's Hospital. First published 2006. Reviewed Oct 2007.

Kids Health Info app

The app will enable you to search and browse more than three hundred medical fact sheets and work offline.



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