

than for children who have severe permanent visual impairments, the following discussion concentrates primarily on the needs of such children. The nursing care objectives in either situation are to (1) reassure the child and family throughout every phase of treatment, (2) orient the child to the surroundings, (3) provide a safe environment, and (4) encourage independence. Whenever possible, the same nurse should care for the child to ensure consistency in the approach.

When sighted children temporarily lose their vision, almost every aspect of the environment becomes bewildering and frightening. They are forced to rely on nonvisual senses for help in adjusting to the visual impairment without the benefit of any special training. Nurses have a major role in minimizing the effects of temporary loss of vision. They need to talk to the child about everything that is occurring, emphasizing aspects of procedures that are felt or heard. They should always identify themselves as soon as they enter the room and before they approach the child. Because unfamiliar sounds are especially frightening, these are explained. Encourage the parents to room with their child and participate in the care. Familiar objects, such as a teddy bear or doll, should be brought from home to help lessen the strangeness of the hospital. As soon as the child is able to be out of bed, orient the child to the immediate surroundings. If the child is able to see on admission, this opportunity is taken to point out significant aspects of the room. Encourage the child to practice ambulating with the eyes closed to become accustomed to this experience.

The room is arranged with safety in mind. For example, a stool placed next to the bed to help the child climb in and out of bed. The furniture is always placed in the same position to prevent collisions. Remind cleaning personnel to keep the room in order. If the child has difficulty navigating by feeling the walls, a rope can be attached from the bed to the point of destination, such as the bathroom. Attention to details (such as well-fitting slippers and robes that do not drag on the floor) is important in preventing tripping. Unlike the child who is visually impaired, these children are not familiar with navigating with a cane.

The child is encouraged to be independent in self-care activities, especially if the visual loss may be prolonged or potentially permanent. For example, during bathing, the nurse sets up all of the