

fantasizing and worrying. With complex procedures, more time may be needed for assimilation of information, especially with older children. For example, the explanation for an injection can immediately precede the procedure for all ages, but preparation for surgery may begin the day before for young children and a few days before for older children, although the nurse should elicit older children's preferences.

### **Establish Trust and Provide Support**

The nurse who has spent time with and established a positive relationship with a child usually finds it easier to gain cooperation. If the relationship is based on trust, the child will associate the nurse with caregiving activities that give comfort and pleasure most of the time rather than discomfort and stress. If the nurse does not know the child, it is best for the nurse to be introduced by another staff person whom the child trusts. The first visit with the child should not include any painful procedure and ideally should focus on the child first and then on an explanation of the procedure.

### **Parental Presence and Support**

Children need support during procedures, and for young children, the greatest source of support is the parents. They represent security, protection, safety, and comfort. Several studies have reported a positive impact on parental distress and satisfaction and no difference in technical complications when parents remain with children ([Piira, Sugiura, Champion, et al, 2005](#)). Controversy exists regarding the role parents should assume during the procedure, especially if discomfort is involved. In 2006, 18 professional associations developed a consensus statement of support for the option of family presence during invasive procedures ([Henderson and Knapp, 2006](#)); several associations have published additional support ([American Association of Critical Care Nurses, 2006](#); [Emergency Nurses Association, 2005](#)). The nurse should assess the parents' preferences for assisting, observing, or waiting outside the room, as well as the child's preference for parental presence. Respect the child's and parents' choices. Give parents who wish to stay an appropriate explanation about the procedure and coach them about where to sit or stand and what to say or do to help the child through the procedure. Support parents who do not want to