preoperative medication (if prescribed), transport to the operating room, the mask on the face during induction, and the stay in the postanesthesia care unit (PACU). Wearing a hospital gown without the security of underpants or pajama bottoms can also be traumatic. Therefore, these articles of clothing should be allowed to be worn into the operating room and removed after induction of anesthesia. Children are at higher risk of ineffective response to anesthesia because of higher anxiety associated with stranger anxiety (infants), separation anxiety (toddlers and preschoolers), and fear of injury or death (adolescents) (Romino, Keatley, Secrest, et al, 2005).

Psychological intervention consisting of systematic preparation, rehearsal of the forthcoming events, and supportive care at each of these points has shown to be more effective than a single-session preparation or consistent supportive care without systematic preparation and rehearsal (Kain, Caldwell-Andrews, Mayes, et al, 2007). A family-centered preoperative preparation program may consist of a tour of the perioperative areas with short explanations of the events 5 to 7 days before surgery, a video to take home and review a couple of times with additional explanations and demonstrations of perioperative processes, a mask to take home and practice with, pamphlets to guide parents on supporting children during induction, phone calls to coach parents on preparing children 1 or 2 days before surgery, and toys and supplies in the holding area. Therapeutic play is an effective strategy in preparing children, and increased familiarity with medical procedures decreases anxiety (Li, Lopez, and Lee, 2007).

Parental Presence

Some institutions support parental presence during induction of anesthesia. According to research conducted by Kain, Caldwell-Andrews, Mayes, and colleagues (2007), benefits of well-prepared children and parents along with parental presence during induction of anesthesia include reduced anxiety for children and parents, lower doses of postoperative analgesia, lower incidence of severe emergence delirium symptoms, and shorter discharge time for short procedures. Other studies have not supported a reduction in children's anxiety (Yip, Middleton, Cyna, et al, 2009).

Concern exists regarding the appropriateness of parental presence during induction for all parents. Some parents may