

may include visiting nurse or home health agencies, private nurse services, the school system, a physical therapist, a mental health counselor, a social worker, and any number of community agencies. Sharing the important issues surrounding the child's and family's needs is essential. Referral summaries should be concise, specific, and factual. When numerous support services are required, periodic collaboration among the professionals involved and the family is an excellent strategy to ensure efficient usage and comprehensive delivery of services.

## Care of the Child and Family in Special Hospital Situations

In addition to a general pediatric unit, children may be admitted to special facilities, such as an ambulatory or outpatient setting, an isolation room, or intensive care.

### Ambulatory or Outpatient Setting

The ambulatory or outpatient setting provides needed medical services for the child while eliminating the necessity of overnight admission. The benefits of ambulatory care are (1) minimized stressors of hospitalization, especially separation from the family; (2) reduced chances of infection; and (3) increased cost savings. Admission to the ambulatory or outpatient hospital setting usually is for surgical or diagnostic procedures, such as insertion of tympanostomy tubes, hernia repair, adenoidectomy, tonsillectomy, cystoscopy, or bronchoscopy.

In the ambulatory or outpatient setting, adequate preparation is particularly challenging. Ideally, the child and parents should receive preadmission preparation, including a tour of the facility and a review of the day's events. Parents need information in advance to help prepare the child and themselves for surgery and enable them to care for the child at home after the procedure. Parents also appreciate suggestions for items to bring to the hospital, such as blankets or stuffed animals. When preadmission preparation is not possible, time should be allowed on the day of the procedure for children to become acquainted with their