prescribed to reduce the possibility that a child might experience unrelieved pain but be too sedated to report it. Sedation in these situations is widely regarded as providing comfort, not euthanasia. Clinicians and ethicists have a range of views regarding assisted suicide and euthanasia, but they all agree that no child or parent should choose death because of inadequate efforts to relieve pain and suffering.

Review Questions

- 1. When caring for their infant, a parent asks you, "Is Emily in a lot of pain? How would you know since she can't really tell you?" The best answer to this question is
 - a. "Infants don't feel pain as we do because their pain receptors are not fully developed yet."
 - b. "The nurses give pain medication before she really feels the pain."
 - c. "We assess her pain using an infant pain assessment tool and give the medicine as needed."
 - d. "Although we try to give her medicine before she feels pain, we watch her very closely and use different techniques to help relieve the pain."
- 2. Pain scales for infants and their uses include but are not limited to
 - a. CRIES: Crying, Requiring increased oxygen, Inability to console, Expression, and Sleeplessness
 - b. FLACC Pain Assessment Tool: Facial expression, Leg movement, Activity, Cry, and Consolability
 - c. Non-Communicating Children's Pain Checklist (NCCPC): Parent and health care giver questionnaire assessing acute and chronic pain
 - d. Neonatal Pain, Agitation, and Sedation Scale (NPASS): For infants from 3 to 6 months old
- 3. As the nurse is getting Nathan ready for surgery, his doctor asked you to explain preemptive analgesic to Nathan's mother. Which response leads you to believe his mother needs more teaching?
 - a. "I understand that preemptive analgesia is giving Nathan pain