areas of fibrotic tissue. Because calcium EDTA and lead are toxic to the kidneys, keep records of intake and output, and assess the results of urinalysis to monitor renal functioning.

Atraumatic Care

Lead Chelation Therapy

To lessen the pain from intramuscular injection of calcium disodium edetate ($CaNa_2EDTA$ or calcium EDTA), the local anesthetic procaine is injected with the drug. Apply topical anesthetic cream such as eutectic mixture of local anesthetic (e.g., lidocaine-prilocaine [EMLA]) or LMX4 (4% lidocaine) over the puncture site before the injection of EDTA and British antilewisite (BAL) (time per manufacturer's guidelines).

Nursing Alert

Use extreme caution with chelating agents. Incidences of child death from hypocalcemia have been recorded when Na_2EDTA was substituted for $CaNa_2EDTA$ and used as a chelating agent (Fountain and Reith, 2014).

Nursing Alert

Adequate urinary output must be ensured with administration of calcium EDTA. Children receiving the drug intramuscularly must be able to maintain adequate oral intake of fluids.

Discharge planning for children with lead poisoning must include thorough education of families regarding safety from lead hazards, clear instructions regarding medication administration and follow-up, and confirmation that the child will be discharged to a home without lead hazards. Although the nurse must use caution to avoid alarming parents unnecessarily, it is important that they know the risk implications for their child's behavior and cognitive functions. Nurses should observe the development and behavior of children who are hospitalized. Thoroughly evaluate any concerns that are identified. Referral to a child development or speech and