

Physical Preparation

One area of special concern is the administration of appropriate sedation and analgesia before stressful procedures. [Chapter 5](#) describes sedative medications used for procedures.

Performance of the Procedure

Supportive care continues during the procedure and can be a major factor in a child's ability to cooperate. Ideally, the same nurse who explains the procedure should perform or assist with the procedure. Before beginning, all equipment is assembled, and the room is readied to prevent unnecessary delays and interruptions that increase the child's anxiety. Minimizing the number of people present during the procedure also can decrease the child's anxiety.

Nursing Tip

To avoid a delay during a procedure, have extra supplies handy. For example, have tape, bandages, alcohol swabs, and an extra needle when performing an injection or venipuncture.

To promote long-term coping and adjustment, give special consideration to the patient's age, coping skills, and procedure to be performed in determining where a procedure will occur. Treatment rooms should be used for procedures requiring sedation, such as bone marrow aspirates and lumbar punctures in younger children. Traumatic procedures should never be performed in “safe” areas, such as the playroom. If the procedure is lengthy, avoid conversation that could be misinterpreted by the child. As the procedure is nearing completion, the nurse should inform the child that it is almost over in language the child understands.

Expect Success

Nurses who approach children with confidence and who convey the impression that they expect to be successful are less likely to encounter difficulty. It is best to approach a child as though cooperation is expected. Children sense anxiety and uncertainty in an adult and respond by striking out or actively resisting. Although it is not possible to eliminate such behavior in every child, a firm approach with a positive attitude tends to convey a feeling of