

surroundings and for nurses to assess, plan, and implement appropriate teaching.

Explicit discharge instructions are important after outpatient surgery (see [Family-Centered Care](#) box and the [Preparing for Discharge and Home Care](#) section earlier in this chapter). Parents need guidelines on when to call their practitioner regarding a change in the child's condition. A follow-up telephone call system allows for nurses to check on the child's progress within 48 to 72 hours after discharge. It also provides an opportunity for the nurse to review discharge information and answer questions.

## Family-Centered Care

### Discharge From Ambulatory Settings

1. Before beginning, explain that all instructions will also be presented in writing for the family to refer to later.
2. Provide an overview of the typical trajectory (expected pattern) of recovery.
3. Discuss expected progression of the child's activity level during the postdischarge period (e.g., "Mary will probably sleep for the rest of the day and feel kind of tired most of tomorrow but will be back to her usual activities the next day").
4. Explain which activities the child is allowed and what is not permitted (e.g., bed rest, bathing).
5. Discuss dietary restrictions, being very specific and giving examples of "clear fluids" or what is meant by a "full liquid diet."
6. Discuss nausea and vomiting, if applicable, explaining how much is "normal" and what to do if more occurs (e.g., "Juan may be sick to his stomach and vomit. This is normal. However, if he vomits more than three times, please call us at this number right away").
7. Discuss fever and appropriate comfort measures, explaining how much fever is considered "normal," and specifically what to do if