**Children’s Comfort Promise**

**Standard of Care for Needle Procedures**

1. **Numbing the skin**
   * Topical anesthetic – 4% lidocaine cream
     + Information sheet available for families on Star Net.
     + Safe and effective for all ages to use.
     + Cream available on patient care units and in Children’s outpatient pharmacies.
     + Phlebotomy staff will not apply but may show parent or nursing staff where to apply.
       - DO NOT apply to fingers, toes or heels – no evidence to support decreased pain at these sites.
       - May be applied up to 4 sites, 4 times a day.
     + Cream is most effective if left on for at least 30 minutes prior to venipuncture.
     + Once cream is removed, numbing cream may remain effective up to 60 minutes.
     + Lidocaine is a vasoconstrictor but once it is removed veins should be back to normal after 5-15 minutes with the numbing cream still effective.
       - Compensation trick – remove cream with warm wash cloth and leave the warm wash cloth or use a warm pack on the site while prepping for the draw.
2. **Sucrose or breastfeeding**
   * Used for babies 12 months and younger.
   * Sucrose and breastfeeding are most effective if applied 1-2 minutes prior to start of procedure and continued during the procedure when possible.
   * Effects last 4-5 minutes after given or stopped.
   * Sucrose
     + TootSweet® / Sweeties available on carts and in draw rooms
       - Squeeze onto pacifier
       - Place a small amount on inside of cheek
3. **Upright/Comfort positioning**
   * Positioning for comfort leads to decreased pain sensation
     + Less frightening and intrusive for the child to be sitting upright versus being laid down and restrained which creates increased anxiety and pain.
     + Child may sit on parent’s lap or have parent sit near child.
     + Parent’s body may be used as a shield or distraction so child does not have to witness the blood draw.
     + Babies develop trunk control at 6-months of age and that’s when they can begin sitting up for the procedure.
     + Patient’s younger than 6 months can be held in the cradle position/swaddled.
4. **Distraction**
   * Can be used for all ages to decrease the pain sensation allowing the patient to focus on a positive experience rather than the procedure being done.
   * Taking the child’s mind off the procedure decreases anxiety and stress.
   * Child can later associate the procedure with a positive memory creating a cycle where the child comes in for future visits feeling relaxed and confident.
   * Age appropriate distractions
     + Infants - colorful toys, music, books
     + Toddlers - favorite toy, music, books, bubbles, pinwheels, videos
     + School age - books, bubbles, music, videos, phone apps, games, verbal stories, imagery, breathing, stress ball, counting backward
     + Teens/Young adults - music, games, phone apps, videos, imagery, deep breathing, stress ball
   * Other distractions
     + Make rhythmic or soothing sounds.
     + Sing a song.
     + Engage the child in conversation; ask about: siblings, school, hobbies, sports, lunch
     + Instruct parent on helping with distraction.

**Resources**

* + Child Life - if child’s anxiety level is severely elevated
  + Nitrous – defer to nursing or ordering provider

**Additional Information**

* + Challenges dealing with pediatric patients
    - Physical challenges
    - Psychological challenges
      * Fear of strangers
      * Separation anxiety
      * Limited language use
      * Fear of pain and touch
  + Guide the patient through the process
    - Communicate with a soft voice.
    - Simple honest answers are best for questions the child might have.
      * Do not say ‘this won’t hurt’.
      * Do not say ‘almost done’, if you are not almost done.
    - Maintain positive body language that indicates to the child and parent you are relaxed and confident.
    - Ensure eye to eye contact while listening to the child.
    - Be sensitive to the child’s wishes whenever possible.
  + Provide choices when possible.
    - Increases the child’s sense of control.
    - Beneficial to involve the child in the process.
    - Possible choices to give to the child, but not limited to:
      * ‘Do you want to sit on mom or dad’s lap or sit by yourself?’
      * ‘Do you want to watch the blood draw or look away?’
      * ‘Would you like to know each step as it happens or would you rather not know?’
      * What distraction would they like to use: bubbles, TV, book, toy, etc.
  + What adolescents want to know
    - Older patients want more information about the procedure.
    - Use the “5-W’s”
      1. Who’s going to do this procedure?
      2. What’s going to be done?
      3. When are you going to do it and when will it be over?
      4. Where are you going to stick me?
      5. Why are you doing this to me?
  + Other tips for reducing pain
    - Deep breathing for children over age 3 is a great coping skill and distraction at the same time.
    - If the child is 4 years or older, rubbing or stroking the site prior to cleansing will decrease the sense of pain.