

Infants and Toddlers in the Healthcare Environment #3229

Although they have smaller bodies, children are not miniature adults. While most adults have had some exposure to the healthcare system, children generally have not, and so exhibit a greater fear of the unknown. They don't have the same language skills and have less capacity to cope with anxiety and pain. By understanding the needs of infants and young children, and utilizing some simple techniques, sample collection can be less painful and traumatic for child, parent, and sample collector.



0 to 1: From birth to their first birthday, these little patients experience great physical and developmental growth. At birth their needs are very simple: to be fed, kept warm and dry, and to have nurturing human contact.

As they grow, they start to recognize people and objects, and towards the end of their first year of life may speak a couple of words and mimic sounds. They learn by imitation and can obey simple commands and understand the meanings of several words. Because they are learning about the world with all their senses, anything they find with their hands will be put into their mouths, so be vigilant about removing every bit of debris after a procedure.

Because of the choking hazard, it is against the CLSI standards to place bandages on children under two years of age.

Around six months of age they have mastered the process of rolling from their stomach to their back and vice-versa, and they may do so quite quickly. Great caution must be exercised to prevent falls. Infants must never be left unattended on any surface.

Between seven to ten months of age, babies become fearful of strangers and experience separation anxiety. If possible, make sure a parent is in the baby's line of sight at all times. To reduce the stress of frequent exposure to strangers, it is best to limit the number of caregivers. Involve the infant's family in all procedures to the extent possible.

Usually just before their first birthday, infants will begin to pull themselves up to a standing position in their crib and on furniture. A falling hazard exists because of this, so caregivers must be sure crib rails are replaced in an upright and locked position before leaving the infant's bedside.

This age group obviously cannot understand an explanation of a sample collection. They can, however, very accurately read the body language of caregivers and will pick up on any anxiety or nervousness, turning a calm infant into a screaming one. A calm, soothing approach is important. Make frequent eye contact with the baby, smile and speak softly. Make sure they are warm, comfortable, and not uncovered too soon before performing the procedure.

1 to 3: Children ages one to three are beginning to feel a sense of control over their environment. They are independent in their running, jumping and climbing, and love to experiment with using objects in different ways. Because of their high level of curiosity and physical ability to explore their world, the safety of these agile little tots is of great concern. They can move at lightning speed and be into something they shouldn't in the blink of an eye. A parent should be present in the room with the child whenever possible. While their command of language has grown, they still respond better to visual cues than spoken ones. A patient in this age group may get very upset, even with a painless procedure, if she perceives it as something she does not want to do. At this age they can see things from only one point of view, their own.

A firm, direct approach with simple words is the best way to communicate with this age group, emphasizing the aspects which require the child's cooperation. Allow choices whenever possible. Establish rapport with your young patient by being warm and friendly. Sometimes, acting a little silly will amuse them and take their mind off of unfamiliar equipment. Ask the parent what their child's experience with blood sample collections has been, if any, and find out if there has been an approach that has worked well in the past. Smile and calmly chat with your patient about a favorite toy or pet while preparing supplies, taking care that they do not see any needles. Their attention span remains quite short, so explain to the child what will happen in simple words just before the procedure and enlist the assistance of the parent or another caregiver to hold the child for safety.



Pediatric draws can be challenging; nobody wants to cause a child pain. Prepare yourself emotionally, have all supplies available, review the procedure ahead of time if necessary, and present yourself in a calm, confident, professional way. This will make the collection go easier for all involved.

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Test Your Knowledge

- Which of the below statements is not correct?
 - children's bodies are like miniature adults
 - babies are unable to sense nervousness and anxiety
 - babies do not have good eye-hand coordination and cannot put things in their mouths
 - all of the above are incorrect
- What is one reason to limit the number of caregivers for infants seven to ten months of age?
 - to prevent confusing them as to who their parent is
 - this age group has a fear of strangers
 - this age group has separation anxiety
 - both b and c
- What mobility could a six month old infant have that would present a safety hazard?
 - they can stand in their crib
 - they can place objects in their mouths and roll side to side
 - both a and b
 - none of the above
- What do CLSI standards say about placing bandages on children less than two years of age?
 - all bandages must be well secured
 - bandages are contraindicated in children of this age due to a choking hazard
 - bandages should remain on at least 2 hours to prevent infection
 - place the bandage on the child if the parent requests it
- What mobility might you expect of one to three year old children?
 - running, jumping, and climbing
 - they can move quickly and unexpectedly
 - they may experiment with objects in dangerous ways (ie. thermometer in an electrical outlet)
 - all of the above
- When do you explain a procedure to a one to three year old?
 - thirty minutes prior to the procedure is adequate
 - an hour before so they have time to understand
 - a one to three year old does not need to have an explanation
 - immediately before the procedure takes place

Name: _____

Date: _____

Facility/Supervisor _____

Dept: _____