

## Useful Numbers

**Practice Plus** (Brighton walk-in centre / GP service) **0333 321 0946**

Open every day from 8am to 8pm, including bank holidays.

[www.practiceplusbrightonstation.nhs.uk](http://www.practiceplusbrightonstation.nhs.uk)

**For out of hours GP service or advice ring NHS 111**

**Royal Alexandra Children's Hospital**  
**01273 696955 Ext. 2593**  
Children's Emergency Department

Please be aware that staff in the Children's Emergency Department will not be able to give you medical advice over the telephone.

Produced by the **Children's Emergency Department**.  
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# Ketamine Sedation of Children

**For procedures in Children's  
Emergency Department**



the  
**alex**

**Children's Emergency Department**

## Part 1: ABOUT SEDATION

### What is sedation?

Sedation is a medicine given to children to make them feel sleepy and relaxed.

Your child may become distressed and afraid when having certain tests or treatments. Fear can make their pain worse. Procedural sedation (sedation when they are having a procedure, like an injection or stitches) aims to reduce your child's anxiety and fear.

Children do not always sleep with sedation medicines. The sedation may make them feel sleepy or make them unable to remember the procedure. The procedure can then be done without causing too much distress for you and your child.

### How will my child be sedated?

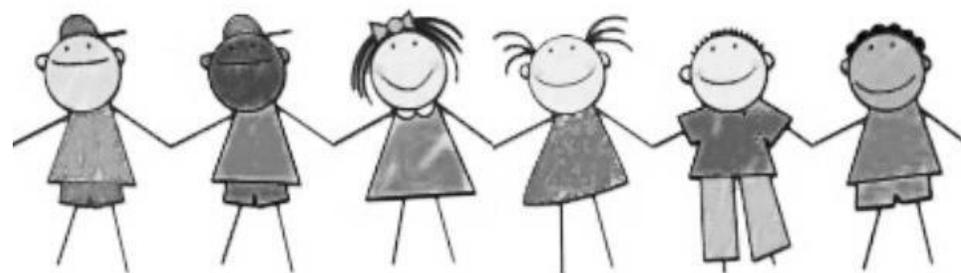
Your child will be sedated with a drug called Ketamine which is given by injection either into a vein, or into their muscle on their arm, leg or buttock.

Ketamine is commonly used for sedation in children. When we give your child ketamine they get sleepy and do not remember what happened. There are some special features about sedation with ketamine that you should know about:

- Your child may seem to be awake after receiving ketamine – this is because ketamine causes a 'trance-like' state;
- Your child may move and need someone to hold them still;
- Your child may drool more than usual;
- Sometimes as your child wakes up they may have some agitation, hallucinations or nightmares. These sensations usually improve if you comfort your child in a quiet dark area until they are fully awake.

If your child has any of the following please bring them back to the CED at the Alex the same day:

- Your child won't stop vomiting;
- Your child has breathing problems or their breathing is abnormal;
- If you have any concerns.



### *Key points to remember*

- Sedation is commonly used in children for procedures;
- You need to give consent before your child has sedation;
- Make sure you understand the reasons for and the risks of sedation;
- Be as open and honest as you can with your child about what is going to happen.

### Part 3: HOW CAN I CARE FOR MY CHILD ON THE WAY HOME AND FOR THE NEXT 24 HOURS?

Sometimes the delayed effects of the medicines may make your child a bit confused, sleepy or clumsy for a while after the procedure.

You need to be extra careful caring for and supervising your child for the next 24 hours.

- If your child falls asleep in the car, watch them to make sure that they do not have any difficulty breathing. **DO NOT** leave your child alone in a car seat or in the car;
- Let your child sleep. Children may go to sleep again after getting home from the hospital. Sometimes children may sleep more because of the sedation medicine;
- Check on your child's sleeping pattern the night after getting home. If their sleeping seems heavy or strange then wake them up gently. If you cannot wake them or something seems wrong in how they look or breathe, **call an ambulance and return to the hospital immediately**;
- Sometimes children may feel sick or vomit if they eat a big meal too soon after sedation. Give your child clear liquids such as diluted fruit juice, ice pops, jelly, clear soup, etc.
- Supervise all playing and bathing for the next 8 hours after getting home. **DO NOT** let your child swim or use play equipment (bikes, monkey bars, etc.) that might cause an accident (for the next 24 hours).

### Do I need to consent to my child being sedated?

*As the parent or legal guardian we cannot sedate your child without your consent.*

*Before you consent you need to understand the reasons for sedation and the risks that are involved.*

*This booklet will help you understand the consent process. It contains all the information you need to make a decision and forms part of the informed consent process.*



### What do I need to know before I consent?

- A staff member will remain with your child until they are awake.
- Some children (1 in 10) develop a rash after receiving ketamine. Like with any medication there is tiny risk they have an allergic reaction to the medicine which may need additional treatment.
- Up to 1 in 10 children vomit during or after the procedure. Very rarely, they may breathe the vomit into their lungs, which would need additional treatment.
- Mild agitation occurs in 1 in 5 children. Rarely the agitation is severe and your child may require additional medication to calm them. If this happens your child may be sleepy for longer.
- In the highly unlikely event of your child having a complication related to their airway or breathing (1 in 100), we will give them oxygen through a mask or breathing tube.
- Your child will be discharged when it is safe to do so. Expect to wait for an hour or more after the procedure
- We may use a hospital consent form for the procedure which you will sign with the doctor completing the procedure.

## What do I need to know before I consent (cont.)?

- We will log the details of your child's sedation into a confidential sedation registry to use for future research purposes. All details will be recorded and maintained in accordance with the hospital's Information Governance policy. **Please inform us immediately if you do not wish us to keep your child's information.**



## Part 2: HOW CAN I HELP MY CHILD?

### How can I help my child before the procedure?

- Check with the nurse or doctor before giving your child anything to eat or drink;
- Ask the doctor/ nurse to explain the procedure to you and to your child;
- Before the procedure the ED staff (for example, nurses and doctors) will try to help your child cope using interactive games, toys, playing with equipment, etc.
- Talk to your child about some ways to cope (for example, looking at an interactive book, using their imagination to be in a nice place, blowing bubbles);
- It helps not being too upset or nervous yourself – your child will notice this.

## How can I help my child during the procedure?

- Giving your child a sense of control with some simple choices is helpful. We can allow them to choose things they may like. For example, music or video options, or which finger the oxygen probe may be placed on. It is not helpful to let your child decide the exact moment the procedure is going to happen.
- The level in which you will be able to engage/involve your child will depend on how deeply sedated your child becomes. Your child may need reminders of the coping methods you decided upon earlier (for example, “blow away the hurt”). This sort of distraction is very helpful;
- There will always be a Children's Emergency Department staff member present during the procedure to help, but having a parent (or another adult) who knows the child stay with them is usually helpful.

### How can I help my child after the procedure?

- Stay with your child. They may not remember where they are or why they are in hospital;
- Focus on the good things your child did. For example, “you did a great job blowing away the hurt.”
- You will have to stay in the Emergency Department until your child is fully awake and the doctor has discharged your child.



**(Only to be used in the Children's Emergency Department)**

**Record of a patient's permission to have a procedure or medical treatment**

TRUST ID NUMBER	
NHS NUMBER	
SURNAME	
FIRST NAME	
DOB	MALE / FEMALE (CIRCLE)
AFFIX ADDRESSOGRAPH LABEL HERE	

**SECTION 1 – MUST BE COMPLETED BY A DOCTOR**

**Details of proposed sedation procedure**

I confirm that I have explained to the patient, parent or legal guardian:

- the reasons for using sedation
- the requirement for the patient to be kept still and possible methods
- the risks and benefits of the operation or procedure as detailed in the accompanying parent information leaflet
- any appropriate alternatives to the operation/procedure
- How to care for the patient after the sedation and on going home, and when to come back to hospital.
- That we will log the details fo the patient's sedation into a confidential sedation registry to use for future research purposes.
- the Patient Information Leaflet and have answered and documented any concerns that have arisen

Details of sedation to be given:

.....  
 .....

Reasons for the sedation:

.....  
 .....

Signature of doctor ..... Date:.....

Name (print) ..... Job Title: .....

GMC Number .....

**Consent form**

**(Only to be used in the Children's Emergency Department)**

**Record of a patient's permission to have a procedure or medical treatment**

**Special requirements**

The communication and access needs of the person with parental responsibility have been met, for example, language interpretation, sign language, access needs etc. (Circle which is appropriate).

No specific needs identified / Need identified

If needs were identified, please state what was provided:

.....  
 .....

**SECTION 2 – PARENT / LEGAL GUARDIAN MUST READ AND UNDERSTAND THE FOLLOWING**

- I confirm that I have legal responsibility for this child
- I have checked that the details on this form are correct.
- I agree to the sedation procedure as described on this form being performed on my child
- I confirm that I have been given a copy of the procedural sedation patient information leaflet and have read it
- I confirm that I understand the risks and benefits of the sedation procedure
- I confirm I have had the opportunity to have any questions about the procedure answered
- I understand that the doctor, whose name is on this form or the doctor who has been treating my child so far, may not carry out the procedure.
- I understand that any other procedure not shown on this form will only be carried out if it is necessary to prevent serious harm to my child or save their life
- I understand that I may withdraw my consent to this procedure at any time by notifying the consenting doctor and I have a right to a second opinion
- I consent to my child's details being kept on the sedation registry

**Yes**                       **No**

- I have listed below any procedures that **I DO NOT** wish to be carried out on my child at this time

.....  
 .....

Signature: ..... Date: .....

Name (print): .....

Relationship to child: .....