

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

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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Publication date: March 2019. Review March 2021.



Nitrous Oxide 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?

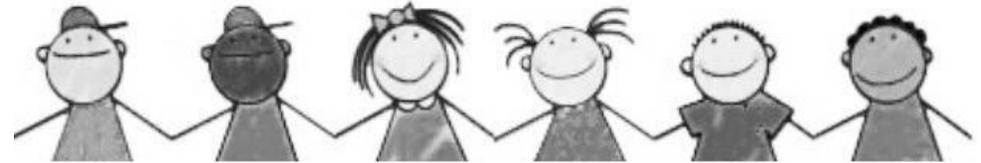
Your child will be sedated with Nitrous Oxide.

Nitrous Oxide is an anaesthetic gas that your child breathes in through a mask. It is also known as 'laughing gas'. It is commonly used for minor procedures in the emergency department for children.

The gas will make your child sleepy, dazed and easier to manage for procedures that need your child to stay still, for example, stitches. The gas may also cause some minor memory loss about the procedure which is likely to be beneficial to your child's overall experience.

What are the side effects of sedation with nitrous oxide?

The most common side effects related to Nitrous Oxide are vomiting or nausea. This occurs in about 1 in 10 children. If your child experiences any side effects, they will be looked after by the staff in the Emergency Department until it is safe for you and your child to be discharged home.



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. It helps not to be too upset yourself.

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 seat, watch them to make sure that they do not have any difficulty breathing. DO NOT leave your child alone in a car seat or alone 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).

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 strange or unusual behaviour;
- If you have any concerns.

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 and if needed, we will give your child oxygen through a mask or breathing tube
- Your child may vomit. Very rarely, they may breathe the vomit into their lungs, which would need additional treatment
- Occasionally children develop an allergic reaction to the medicine which may need additional treatment
- Children can sometimes become extra sleepy and need some breathing support. This usually doesn't last long as the gas wears off quickly.
- Your child will be discharged when it is safe to do so. Expect to wait for an hour or more after the procedure
- We will use a hospital consent form for the procedure which you will sign with the doctor completing the procedure.
- We will log the details of your child's sedation into a Children's Emergency Department sedation registry to use for future research purposes. **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.

