

Having Surgery

Children's Hospital

Main Building



The Children's Hospital *of* Philadelphia®

Hope lives here.

Dear Parents and Caregivers,

We are pleased that you have chosen The Children’s Hospital of Philadelphia for your child’s care. We know that a child’s surgery is a stressful experience for the entire family, but we want you to know that your child is in good hands. Our staff members are experts in caring for children and their families. A team of healthcare providers, including nurses, nurse practitioners, surgeons, anesthesiologists and child life specialists will provide your child’s surgical care and will work with you to do everything possible to make your experience safe, convenient and comfortable.

The information in this booklet will help you prepare your child for surgery. We hope it will help answer any questions you have. We are here to help you.

Sincerely,

The Staff of The Children’s Hospital
of Philadelphia

Contents

How Do I Prepare My Child for Surgery? 2 <i>(A Guide for Each Age Group)</i>
Tours 4
When Your Child Needs Anesthesia 5
What to Have at Home 9
Eating and Drinking Restrictions 10
Important Things to Remember 10
The Day Before Surgery 11
The Day of Surgery 12
During Surgery 14
After Surgery 15
What Can I Do for My Child After Surgery? 16
Will My Child Be in Pain? 16
Staying Overnight 17
Going Home 18
What to Expect at Home 18
Helpful Information 20

How Do I Prepare My Child for Surgery?

The anesthesiologist, surgeon, nurse practitioners, nurse anesthetists, nurses and child life specialists will do their best to make your child's visit to the hospital as pleasant as possible; however, you also have a role to play in your child's care. Children do better with surgery and anesthesia when they are well-prepared.

Tell your child that he is going to the hospital for a surgery and explain what will happen during the hospital stay. Use simple words that your child understands and be honest. This will help your child trust you and the people at Children's Hospital.

Ask your child what he is thinking and feeling about the surgery. Let your child know that you will be happy to answer any questions you can. Your child may not have questions right away. This is fine, too.

Children see and hear more than we think they do. How and when to prepare your child depends on his age. Use the information below as a guide to talking with your child about the surgery. Visit Kids Health Galaxy (www.kidshealthgalaxy.com), our website for kids, to prepare your child for a visit to the hospital.

Learn more about having surgery in "Preparing for Surgery – Megan's Story" (www.chop.edu/flash/surgeryprepbook.html).

Please also visit www.chop.edu and look for the Welcome Kit links.

Books can also be helpful. Some books we suggest are: Toddlers, Preschoolers and School-Age Children:

- *A Visit to the Sesame Street Hospital* – Dan Elliott and Deborah Hautzig, 1985
- *Franklin Goes to the Hospital* – Paulette Bourgeois, 1995
- *Curious George Goes to the Hospital* – Margret and H.A. Rey, 1966
- *Going to the Hospital* – Fred Rogers, 1988
- *Tubes in My Ears: My Trip to the Hospital* – Virginia Dooley, 1996

Teens:

- *Coping with a Hospital Stay* – Sharon Carter and Judy Monnig, 2002

Toddlers (1 to 3 years)

Toddlers do not understand the concept of time, so it is best to tell your child about the surgery one or two days before it occurs. To help your toddler feel like he has some control, allow him to choose a favorite stuffed animal, blanket or toy to bring to the hospital. This object will also comfort your child when you cannot be there. It is normal for toddlers to become fussy and have changes in their behavior; it will help if you remain calm and patient.



Preschoolers (4 to 5 years)

Tell your child about the surgery three or four days ahead of time. Your child will probably be very curious and want to know what to expect. Explain the surgery to your child using simple words without too many details. It is normal for preschool children to have fantasies about the hospital experience. Because they do not know what to expect, they will use their imaginations. Preschoolers often think that they did something to cause the surgery, or they may become angry at their caregivers. It is important to tell your child that the surgery is no one's fault and it is OK to tell you how he is feeling. Reading books with pictures of medical equipment and using play medical kits are great ways for a preschool child to explore feelings.

School-age children (6 to 12 years)

Begin preparing your school-age child one or two weeks ahead of time. School-age children often worry about how the surgery will change the way they look. They need details about what will happen before, during and after surgery. Talk about your child's fears and answer questions honestly. You can show pictures to help your child understand what will happen. School-age children often worry that they will wake up during surgery. Explain to your child that there is a doctor whose job is to make sure that he stays asleep and does not feel anything during the surgery. Sometimes children become angry or quiet in the hospital. This is normal. Be supportive and treat your child as normally as possible.

Adolescents (13 years and older)

Include adolescents in all discussions and decisions about their surgery, because they are very aware of their bodies and how they work. Adolescents worry most about how the surgery might change their looks and affect daily activities with friends. Encourage your adolescent to write down and ask any questions he may have. Discuss fears and be completely honest. Adolescents want to be more independent — having surgery may make your adolescent feel less so. It is helpful to support your adolescent and give him some feeling of control during the hospital stay. Your child is welcome to bring an iPod®, DVD/VHS tape or electronic game to help decrease anxiety before and after the operation.

Tours

For more information about how to prepare your child, please contact your child life specialist at 215-590-3836. The child life specialist also coordinates tours of CHOP's surgical areas.



When Your Child Needs Anesthesia

At The Children's Hospital of Philadelphia, a team of specially trained doctors and nurses provides all anesthesia care. The anesthesiologist will want to make sure your child is in the best possible physical condition before surgery. You will either be interviewed by phone or asked to come to CHOP before the day of surgery. If you come to CHOP, a nurse practitioner will examine your child and talk with you about the surgery and anesthesia. The nurse practitioner will ask about allergies and current medications, so make a list and bring it to the visit. The nurse practitioner will ask about medical conditions and specialists your child sees.

- Before you come to the visit, make a list of the names and phone numbers of your child's doctors.
- If your child is seen by a specialist outside of CHOP (for example, a heart, brain, lung doctor, etc.), please bring a copy of the summary from your child's most recent office visit.
- Tell the nurse practitioner if your child has been diagnosed as having drug-resistant organisms such as MRSA or VRE.

The team will note anything about your child that may affect the anesthesia plan and will be able to answer many of your questions. The anesthesiologist may contact you before the day of surgery if there are particular concerns or complex medical issues.

The pediatric anesthesiologist is the physician who will be involved in the care of your child before, during and after surgery. The anesthesiologist may care for your child alone or with a nurse anesthetist or anesthesia resident physician.

The goal of the anesthesia team is to keep your child safe and comfortable during the entire surgical experience. Your child's heartbeat, blood pressure, breathing and blood oxygen level will be monitored closely during the surgery. The anesthesia care team is specially trained to make the surgery as comfortable as possible for your child. Your child's safety and well-being are the team's highest priorities.

Types of Anesthesia

There are 4 main types of anesthesia that can be used for surgery. Your child's surgeon and anesthesiologist will talk with you about which is the best type for your child.

General Anesthesia

General anesthesia provides complete pain relief and loss of consciousness during surgery. With general anesthesia, your child will sleep through the surgery and wake up with no memory of what happened. Although general anesthesia affects the heart rate, blood pressure and breathing, the anesthesia care team is trained to prevent problems from occurring and to treat any problems that arise during the surgery and in the Peri-Anesthesia Care Unit (PACU). Surgery stresses the body and may cause your child to feel sick. Nausea and vomiting are possible side effects after surgery and anesthesia.

Regional Anesthesia

Regional anesthesia (a "nerve block") provides pain relief only to the area where it is needed. This is similar to medicines used by dentists for dental work. Regional anesthesia is used in combination with general anesthesia or sedation so your child will be relaxed, comfortable, and have little or no memory of the procedure.

Monitored Anesthesia

Monitored anesthesia care provides sedation and pain relief during minor procedures. The anesthesiologist gives your child medicines to make him drowsy and to prevent pain. Your child won't completely lose consciousness like he would under general anesthesia.

Combination Anesthesia

Sometimes your child's anesthesiologist may decide to use a combination of both regional and general anesthesia. The regional anesthesia is generally given after your child is asleep from the general anesthesia medicines. This combination allows the anesthesia care team to give your child less general anesthesia while still providing pain relief to the surgical site. The pain relief may last for several hours after the surgery is over.

Methods for Giving Anesthesia

Your child's anesthesiologist will talk with you about the best method for your child.

Mask or Inhalation

With this method, your child breathes anesthesia medicines through a mask until he falls asleep. No intravenous (IV) insertions will be done until after your child is asleep.



Intravenous

This method is most often used for older children and adults. The anesthesia medicines are given through an IV injection. Your child may be sedated prior to placing the IV with oral medication or laughing gas (nitrous oxide).

Risks of Anesthesia

There are risks with anesthesia, just as there are risks from taking any other medicine. Sometimes we can predict the side effects; sometimes we cannot. We will do our best to minimize the risks and side effects. Common side effects from anesthesia include headaches, nausea, vomiting, jaw pain, sore throat, hoarse voice and bruising. Serious complications can occur, but this is rare. Your child's anesthesiologist can answer your questions about the specific risks of anesthesia.

Planning with Your Child's Anesthesiologist

On the day of surgery, the anesthesiologist will meet with you to review the anesthesia plan. You and your child can ask questions and talk to the anesthesiologist about any concerns at this time. If you would like to ask questions before the day of surgery, please call 267-425-4689 Monday through Friday, 8 a.m. to 6 p.m.

For urgent anesthesia questions after 6 p.m. or on weekends, please call the main CHOP number, 215-590-1000, and ask the operator to page the anesthesia resident on call.

Postponing Surgery

Sometimes minor illnesses such as sniffles and colds may cause problems during surgery and anesthesia.

For this reason, the surgeon or anesthesiologist may think it is best to postpone the surgery. Notify your child's surgeon's office before surgery if your child has:

- Cold symptoms such as runny nose, cough or fever
- Diarrhea or vomiting
- Any change from his usual health

- Been exposed to infectious diseases (for example, measles, mumps or chickenpox)
- Taken any ibuprofen (Motrin[®], Advil[®]), naproxen (Aleve[®]) or products containing any of these medicines within the 3 days before surgery unless otherwise instructed by your doctor
- Taken any aspirin or products containing aspirin within 2 weeks before surgery
- Taken herbal medication within two weeks before surgery

You can reach your child's surgeon's office Monday through Friday, 8 a.m. to 5 p.m. After hours, calls are forwarded to an answering service. The answering service will direct your call appropriately.

Eating or drinking too close to the surgery may make surgery unsafe and cause your child's surgeon and anesthesiologist to postpone or cancel the surgery. Follow the feeding instructions you were given. See page 10 for eating and drinking guidelines.

How You Can Help

Understand that every child reacts differently to anesthesia and surgery. Be honest with your child. Explain what will happen in words your child will understand. Reassure your child that he will be asleep during the surgery and will wake up afterward.

Ask the staff any questions you have so you are comfortable and informed.

What to Have at Home

You will find that going home after surgery is easier if you stock up on a few items. Some suggestions:

- Soup
- Popsicles[®]
- Clear drinks such as apple juice, soft drinks, Gatorade[®] or Kool-Aid[®]
- Aspirin-free pain relief medication such as Tylenol[®]

Eating and Drinking Restrictions

The most important thing you can do for your child is to follow the feeding instructions. Eating and drinking before anesthesia can cause problems such as choking or vomiting during the procedure.

Follow these rules exactly or the procedure will be delayed or cancelled.

NO food, milk, drink, candy or gum after 11 p.m. the evening before your child's procedure except:

Clear Liquids

- Your child may drink only liquids you can see through — water, Pedialyte®, apple juice, white grape juice or Gatorade — until 2 hours before your arrival time.

Breast-feeding

- Babies may be breast-fed until 3 hours before your scheduled arrival time.

Infant Formula

- Healthy babies less than 6 months old on the day of the procedure may have formula until 4 hours before your arrival time.
- Healthy babies 6 to 12 months old on the day of the procedure may have formula until 6 hours before your arrival time.
- Do not add cereal. Do not use formula that has cereal already added.

Important Things to Remember

- The day of surgery can be long and stressful. You can stay with your child before surgery. We will make every effort to reunite you with your child as soon as possible after surgery. For safety reasons, only 2 adults can be in the PACU before and after surgery.
- Other children are not allowed in the PACU. Please make arrangements for the care of your other children so you can be with your child who is in the hospital.

- After surgery, your child will not feel well enough to take public transportation home. Before the day of surgery, please arrange for a ride or taxi home.
- A parent or legal guardian needs to be with the child on the day of surgery. We request that this person not leave during the child's stay. If a court-appointed legal guardian accompanies the child, he will need to bring a copy of the court-issued document proving guardianship.

The Day Before Surgery

Calling for Your Arrival Time

On the day before surgery, call 267-425-4699 between 3:30 p.m. and 6 p.m. for your child's arrival time. For a Monday surgery, please call on the Friday before the day of the procedure. If the procedure is scheduled for the day after a holiday, please call on the last business day before the procedure. If you have special arrival needs, please notify your child's surgeon's office when you schedule the surgical date.

Listen closely to the recorded message on this phone for important information.

What to Bring to the Hospital

If your child is staying overnight, pack a suitcase with a change of clothing for yourself and your child. We will give your child pajamas and slippers.

- Your child is welcome to bring a favorite stuffed animal, blanket, toy, DVD/VHS tape, iPod®, or electronic game to help decrease anxiety before and after the operation.
- Bring containers for glasses, contact lenses (solution, if needed), hearing aids, etc.
- Bring an empty bottle or sippy cup to use after the surgery (if your child uses one).
- Don't forget your child's car seat!
- Bring insurance cards and referral forms, if required.
- Bring a small stroller if your young child is scheduled to go home the same day.

The Day of Surgery

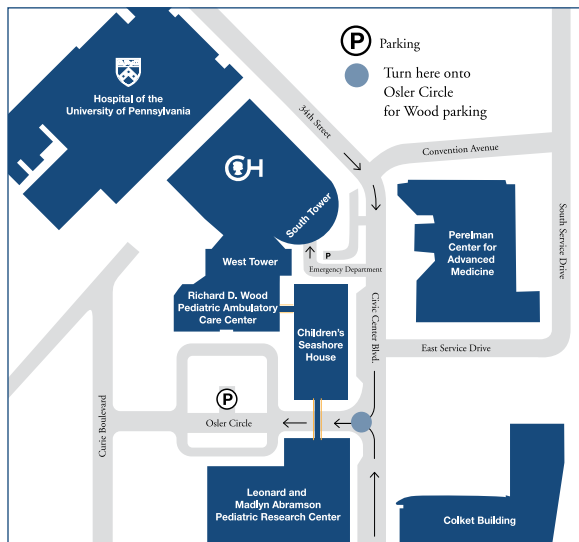
Call 267-425-4700 on the day of surgery if:

- Your child becomes ill the day of surgery.
- Your child has any food or drink (except clear liquids) after 11 p.m. the night before surgery.
- Your child drinks anything, including clear liquids, less than 2 hours before you are asked to be at CHOP.
- You experience any delay the day of surgery that may prevent you from arriving at Surgery Reception on time.

When You Arrive at CHOP

Parking

Surgery is located on the 4th floor of CHOP's Main Building. Please park in the Richard D. Wood Pediatric Ambulatory Care Center garage off Civic Center Boulevard. To get to the garage, turn right off Civic Center Boulevard at the traffic light onto Osler Circle and proceed to the garage entrance. (Please see the map below.) A security officer will be at the garage entrance if you have any questions.



There is a lot of construction around CHOP. Expect traffic delays and allow extra time for them.

Where to Go

Take the Wood Center elevators to the third floor and follow signs to Surgery Reception unless your child's surgeon tells you otherwise. Please note: **The 3rd floor of the Wood Center and the 4th floor of CHOP's Main Building are on the same level.** Once you arrive at Surgery Reception, you will be on the 4th floor.

If you enter through the Main Hospital entrance, please stop at the Information Desk just inside the entrance. Staff at the Information Desk will direct you to Surgery Reception.

Before Surgery

After checking in at Surgery Reception, you and your child will be escorted to a patient room in the PACU. The nurse will take your child's vital signs, including temperature, heart rate, blood pressure and oxygen level. The nurse will also listen to your child's breathing and get an update on her health status, including any medicines or illnesses.



All female patients 12 years old and older or who have begun menstrual periods must have a urine pregnancy test before an anesthetic is given.

Here your child will change into CHOP pajamas, remove underwear and remove all metal and jewelry, including jewelry in body piercings (nasal, tongue, etc.). If your child has long hair, side braids can keep the hair from getting tangled.

While waiting to go to the operating room, you and your child will either remain in your patient room, which has a TV and a DVD and VHS player, or return to the reception area for various play activities.

Before your child goes into the operating room, you will meet with the anesthesiologist to discuss the anesthesia plan. Please feel free to ask questions and express any concerns at any time.

We want the separation between you and your child at the time of surgery to be as smooth as possible. Just before going into the operating room, most children will be given a medicine (“giggle juice”) that can make them relaxed, giddy, sleepy and unsteady. Once the medicine is given, do not allow your child to walk around, because he may fall and get hurt.



In some cases, parents go into the operating room with their child and stay with her until she is asleep under anesthesia. The anesthesiologist can help you choose the best option for your child.

During Surgery

We will show you where to wait while your child is in surgery. A family services nurse will update you on the progress of your child’s surgery and recovery. Staff will help to reunite you with your child either in the

PACU or as your child leaves the PACU. Please stay in the waiting area. Your child’s surgeon will contact you there when the surgery is over.



There are vending machines with snacks and drinks, televisions and computers in this area to ease your wait. You are free to bring your own food to eat at this time. There are also small lockers and a place to store strollers or wheelchairs. Bring your cell phone if you have one.

After Surgery

After the surgery, your child will go back to the PACU to wake up from the surgery and anesthesia. We will make every effort to reunite you with your child as soon as possible. For safety reasons, only 2 adults may stay with your child in the PACU. You will not be allowed to join your child in the PACU if you have other children with you.

Immediately after surgery, your child may look puffy or swollen. Your child may be receiving oxygen, have an IV and may be attached to a heart monitor. A member of the nursing staff will check your child’s heart rate, breathing, blood pressure and temperature as he wakes up after surgery. Please ask your child’s nurse any questions you may have.

What Can I Do for My Child After Surgery?

- If your child is asleep, please do not wake him.
- Speak softly and calmly. Let your child know that he is fine.
- Please respect the privacy of other patients and focus only on your child.
- The use of cell phones or laptop computers is not allowed in the PACU.
- You may be asked to leave the room if there is an emergency.

Will My Child Be in Pain?

After surgery, pain relief for your child will be provided in a variety of ways. Pain relief is a team approach in which you, the surgeon, the anesthesiologist and the nurses will decide what is best for your child.

There are many ways to learn about the pain a child is feeling. The method we choose is based on the child's age and ability to talk. Older children may be asked to rate their pain from no pain to the worst imaginable pain on a scale of 0 to 10. Younger patients may be asked to look at a set of cartoon faces and point to a face that best illustrates their pain. Sometimes we look at the facial expression and behavior of children who cannot talk to tell us about their pain. These methods help us come up with a rating called a pain score. Pain scores help us manage your child's pain.

Each child may wake up from anesthesia differently. Some children may be wide awake in the PACU while others may be groggy for hours after surgery. Some get very confused and agitated for 10 minutes to one hour. This is called "emergence delirium" and is sometimes part of the normal awakening process, particularly in children younger than 6. The child seems to be awake, but is not aware of what is going on. The child may cry, thrash or reach for a parent, and it may be very difficult to calm her. This may be upsetting to watch. Fortunately, it usually goes away by itself. Emergence delirium is seen in about 20 percent of children having brief surgery.

If your child experiences emergence delirium, her nurse will make sure she is safe. Sometimes a quiet, dark room will help her go back to sleep. Usually it just takes time for the effects of the anesthesia to wear off. It is important to stay calm and comfort your child. She will not remember this excited state and often wakes up feeling fine. If you have questions, ask your child's nurse or doctor.

The amount of time your child stays in the PACU depends on the type of surgery and your child's needs.

Staying Overnight

If an overnight stay is planned, your child will go from the PACU to a hospital room. Parents can visit 24 hours a day, and there is room at the bedside for one parent to stay overnight. Other visitors are welcome between 10 a.m. and 9 p.m. A child life specialist is available to visit your child. When he is feeling better, he can go to the playroom and participate in activities.

If an intensive care unit (ICU) stay is planned after surgery, your child may go directly from the operating room to one of the intensive care units. One parent may sleep overnight in the child's room. There is also a small number of sleep rooms available for parents of ICU patients. Our staff in the waiting area can help you sign up for a room when you arrive for surgery.



Going Home

The nurses and doctors caring for your child will work together with you to plan for discharge. If your child is going home on the day of surgery, she will be discharged from the PACU. Before you go home, you will receive written information about how to care for your child. We will explain medicines, special care, appropriate activity, follow-up appointments, what to expect and whom to call with questions.



We want you to be prepared and to understand the discharge instructions. Please feel free to ask any questions you may have.

What to Expect at Home

Here are some general guidelines on what to expect at home after surgery. You will receive specific instructions on the day of surgery about how to care for your child.

Activity

Depending on your child's surgery and anesthesia, he may be unsteady for the first 24 hours and will need to be watched closely.

Feeding

The staff will discuss your child's specific feeding plan with you. Do not force your child to eat, but encourage him to drink, as it will probably make him feel better.

Pain

Your child may have some pain, be cranky or run a slight fever after surgery. The staff will discuss your child's specific pain management plan with you.

Behavior

Some children have temporary behavior changes at home such as changes in sleep patterns, clinginess, changes in eating, hyperactivity, new fears (not wanting to sleep in his own bed, needing a night light) and acting younger (bed-wetting, thumb-sucking). This behavior is temporary and normal. Some ways for parents to help are:

- Assure your child that he is safe and well.
- Read books about hospitals and doctors.
- Play hospital.
- Make a hospital scrapbook.
- Distract your child with games, toys and music.

If you are worried about your child's behavior changes or they last longer than you expected, please call your child life specialist, pediatrician or surgeon.

You and your child are important members of the healthcare team. We are committed to making your stay as pleasant as possible.

Helpful Information

Surgeon's name:

Phone number: _____

My child's surgery is scheduled for: _____

Parent Checklist for Surgery

- Bring any necessary or requested paperwork (for example, a copy of the summary from your child's most recent office visit with a specialist, referrals, etc.).
- Call for arrival time.
- Follow feeding instructions.

Links

- The Children's Hospital of Philadelphia:
www.chop.edu
- Kids Health Galaxy: www.kidshealthgalaxy.com
- Preparing for Surgery – Megan's Story:
www.chop.edu/flash/surgeryprepbook.html

Phone Numbers

- Child Life Specialist/Tours of Surgical Areas:
215-590-3836
- Anesthesia questions: 267-425-4689 Monday through Friday, 8 a.m. to 6 p.m.
For urgent anesthesia questions after 6 p.m. or on weekends: Call the main hospital number (215-590-1000) and ask the operator to page the anesthesia resident on call.
- Arrival time for surgery: 267-425-4699 between 3:30 p.m. and 6 p.m.
- For problems on day of surgery (for example, if your child is sick, if she ate or drank after the instructed time, if you are delayed, etc.): 267-425-4700

If you have any questions
or concerns after
discharge, please call
the numbers listed on
your Instructions for
Home Management sheet.





The Children's Hospital *of* Philadelphia®

Hope lives here.

Founded in 1855, The Children's Hospital of Philadelphia is the birthplace of pediatric medicine in America. Throughout its history, a passionate spirit of innovation has driven this renowned institution to pursue scientific discovery, establish the highest standards of patient care and train future leaders in pediatrics.

For a century and a half, Children's Hospital has served as a haven of hope for children and families worldwide.

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Keep the connection.

