



My Child is Coming for Surgery

How do I Prepare my Child?

Many parents have questions and worries when they have a child coming for surgery. Children also have questions and worries and it is important to validate their fears and to reassure them. Our staff recognizes these needs and will do everything possible to make the surgical experience a positive one.

This page is designed to help parents and children through the surgical journey. We offer many tips and suggestions that parents have found helpful. Please feel free to write down questions as you go through the information on this page. You can take these questions with you to your appointments. It is important to have your questions answered.

The Pre-op Appointment

Paediatric Outpatient Department

This department is also called P.O.P for short. It is located on the 1st floor near 1B. Walk down the main hallway on the 1st floor, past 1B and it is located on the right. There is a window with a receptionist there.

Pre-anesthetic clinic

This department is located in the main lobby of the hospital across from Robin's Donuts. It is labeled, "Preadmission Clinic/Outpatient Lab". There is a window at the side that you will go to. Your surgeon may refer you to pre-anesthetic clinic if he thinks your child would benefit from seeing an anesthetist (Sleep doctor). Normally, your visit with the anesthetist will be the same day

as your pre-op appointment on Paediatric Outpatients. Here you will meet with an anesthetist and he/she will fully assess your child. He will then prepare a complete report which will be read by your anesthetist on the day of surgery. You may have the same the anesthetist as you saw in the clinic but it is not guaranteed. All of the anesthetists in our OR have had a lot of experience with young children.

The OR Tour!

When does it run? **September until June**

Why should I bring my child to the Operating Room Paediatric Tour?

Positive results are seen in children who have been through our tour. The children are confident and less anxious and their parents or caregivers are more relaxed. Please consider bringing your child to the tour! You can read on to learn more about our tour!



Walking Tour

A nurse from the OR team meets all of the families in the main lobby (in front of the information desk) at 6:30pm. We also have Phoebe, a special friend, who will greet the children with a fuzzy orange smile! The children are given name tags and we begin our tour! The walking tour includes Admitting, Paediatric Outpatients, Paediatrics and the Operating Room children's waiting room. We are able to accommodate those who find stairs difficult, so please let us know if we can make the tour easier for any children or parents who are not able to walk the tour.

Dress Up

We will stop at the main holding area of the Operating Room and everyone (guardians and children) will put on disposable OR scrubs, foot covers and hats. We take family photos to be kept by the family as a special memory of their visit to our operating room. (We do not keep the photos for anything else and the photos are erased after the tour)

Please remember that all children are different. Some require more encouragement than others. Please don't worry about this! We have a lot of experience dealing with scared children and we will gently encourage them along the way. We are able to convince kids that the experience is super fun and we make all sorts of accommodations in order to allow them to participate.

Puppet Show

The children can enjoy a stretcher ride to the operating room theatre where they will watch a puppet show! This is the children's favourite part of the tour! In the OR theatre, the children will meet our staff (our after hour volunteers include nurses, anesthetists, respiratory technologists, and support staff). After the show, the children have a chance to "play" with the monitors under supervision of course! The monitors they can try on are: the blood pressure cuff, heart monitor stickers, and oxygen saturation monitor. None of these monitors are painful and they will not be getting any needles. Do not worry if your child does not want to participate. They do not have to try on any monitors if they don't want to. We want the experience to be a positive one. We understand that some children are shy or apprehensive. It is great that they can watch other children try on the monitors so that they see that they are not hurt. Each child will bring home a free souvenir!

Recovery Room

The recovery room nurses will take you to their department, which is very close to the operating room. They will show you what they do and they will answer any questions you may have. The recovery room nurses have many children come through their department. Many times during the day we see a nurse cuddling a child in the recovery room. They are specialized nurses who are very good at their job.

Last Stop! Snacks!

We will bring the children back to our lounge where they can enjoy a juice box and a treat. Our generous staff in the operating room/recovery room purchase the snacks that the children enjoy! If they are really lucky, one of our nurses may even bake some treats! We will give out colouring pages for the children to take home with them. They are also able to pick out some stickers to take home as well. The nursing staff is available to answer any questions on a one to one basis. Please ask anything that is on your mind. No question is silly. We will do our best to answer your question and if we don't know the answer, we will find out for you. It is your right to have your questions

answered. At the end of the tour, we will give you a postage paid envelope that includes an evaluation form, parking pass and your photo. Please take the time to complete the evaluation form at your leisure. It is helpful to know what we are doing right and what we need to improve upon.

****ALLERGIES****

PLEASE LET US KNOW ABOUT ANY FOOD ALLERGIES THAT YOUR CHILD MAY HAVE, OR IF YOUR CHILD HAS A SPECIAL DIET SO THAT WE CAN HAVE THE APPROPRIATE SNACK READY FOR YOU.

Well, now that you know what the tour is all about, how do you sign up? If you have a child coming for surgery, you can complete a form at the surgeon's/dentist's office and it will be faxed to us. We will call you within one month of the surgery date. We also look at the booking list one month before each tour and we will call each family to see if you would be interested in coming to the tour. If you have not received a call, please feel free to call Debra Everts at (807)684-6160 in the operating room to arrange a visit. She would be happy to organize that for you!

Paediatric Tour Video

There are some families who live too far to attend the Paediatric tour in person. We have made a video to show you what to expect when you visit the operating room. Please follow the link below:

www.tbrhsc.net/PaediatricORtour



Commonly Asked Question

How do I Talk to my Child about Surgery?

Prepare yourself first. Ask as many questions as you need to ask to make yourself feel confident that you understand exactly what your child is having done.

Prepare your child. There are a number of ways to prepare your child for surgery.

- Attend the Paediatric tour
- Watch the Paediatric tour video
- Give age appropriate information (there is a wonderful internet site called kidshealth.org that has a specific section for parents, kids and teens.
- Answer questions simply and honestly.

Great Books for Children/Parents:

Goodbye Tonsils!

Picture Puffing books by Craig Hatkoff

Chris gets Ear Tubes

by Betty Pace

Emerson Learns about Surgery

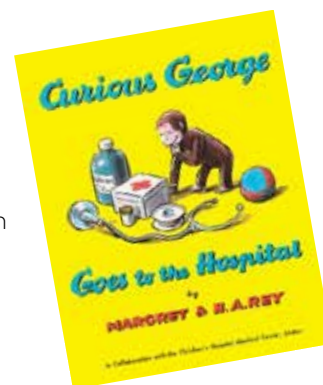
by Erica May

Will It Hurt?

A Parent's Practical Guide to Children's Surgery by Dr. Ketch

Curious George Goes to the Hospital

by Margret & H.A. Rey



How far can I accompany my child?

The child's guardian will come to the operating room's child waiting room with their child. Here the surgeon, anesthetist and nurse will speak with the child and guardian in order to gather all important information that is needed for the surgery. It is here that we will complete the Surgical Safety Checklist.

What can I do to help my child?

Once information is gathered, the nurse will bring the child into the operating room. The best thing that mom and dad can do at this point is reassure their child by:

- Tell your child that nurse _____ will be with him/her the whole time and that nurse _____ will take great care of him/her.
- Tell your child that mom and dad/guardian will be waiting the whole time and that they are not going anywhere.
- Tell your child that he/she will see them as soon as they are done.
- Give a quick hug and kiss and confidently wave and smile as the child has a ride into the OR. (This is the hardest part for the parent(s)/guardian. It is important to remember that a prolonged goodbye is more stressful for the child. Be positive for your child. A quick goodbye is easiest for the child who has been properly prepared for surgery)
- Remain with the child before surgery and stay in hospital while the procedure is being done. (This is important for the safety of your child as well, just in case we have to speak to you during the procedure)

Remain with the child after surgery and until it is time to go home.



Your child **CANNOT** eat or drink anything after midnight the day before surgery. This includes chewing gum and candy.



What is general anesthesia?

(an-uhs-thee-zhuh) The common child procedures we do in the operating require general anesthesia. An anesthesiologist (sleep doctor) will be giving medication to your child either by an anesthetic gas (by mask)

or with liquid medication that is administered through an intravenous (tiny plastic tube inserted into a vein in the arm). This medication will cause your child to go into a “deep sleep”. The purpose of

general anesthesia is to make a person unconscious. When your child awakens, he/she will not remember anything that happens and he/she will be given something to relieve pain.

How is the anesthesia given?

Oxygen is given to your child by mask before any medications are given.

Some anesthesiologists have the child fall asleep with a special anesthetic gas (by mask) and then they insert the intravenous (IV) after the child falls asleep. Liquid medication is then

injected into the IV which makes your child fall asleep.

There are a few anesthesiologists who will administer the IV right away, before the child goes to sleep. They will have the child inhale anesthetic gas, to relax the child, while they insert the IV quickly. The IV takes less than a minute

to insert. The sleep medication is injected into the IV and your child goes to sleep.

The anesthesiologist will be with your child the entire time

What happens if my child absolutely refuses to go for surgery?

It is quite common for children to cry when they leave mom and dad. It is best to give a quick hug and kiss and let them know that you will be waiting. Once they cannot see mom and dad, the crying lessens or stops. Once in the OR, we put the child to sleep immediately and, due to the nature of the medication they are given, they

do not remember most of the experience.

On rare occasions, some children have extreme anxiety. There is no way that this child is going into the OR. You can ask the anesthesiologist about a medication called Midazolam which is a medication that can be given shortly before the child arrives

to the OR. It is given with chocolate syrup to make it taste better. After a short period of time, your child will become very drowsy. A nurse should stay with your child after given Midazolam so that he/she can watch your child’s alertness. After the drowsiness sets in, the child is taken into the OR.

How does my child breathe during surgery?

A special breathing tube is inserted into the child's airway. The tube attaches to oxygen so that the child can receive oxygen during surgery. While he/she is sleeping, the anesthetist monitors the child's breathing the entire time. He/she also monitors the heart's activity, body temperature, blood pressure and the amount of oxygen in your child's blood.

Common side effects?

- Dizzy feeling/groggy
- Nausea or vomiting
- Sore throat (from breathing tube)
- Chilly/shaky feeling

What can I do to minimize risk?

What can you do to prevent complications associated with surgery? Be 100% honest as this is very important. Mention even the smallest things. Give the doctors and nurses a complete history on your child.

This includes:

- Medical conditions (including recent cough, colds or fever)
- disabilities
- Allergies (including latex)
- Patient or family history of adverse reactions to anesthetics
- Your child's temperament/normal behavior patterns
- What does the family call the child (ie. Nicknames)
- Medications that your child is taking (prescription, over the counter, herbal, vitamins, etc)
- Alcohol or drug consumption (teens)
- Smoking? (teens)
- Loose teeth, caps or crowns
- Hearing aids
- Contact lenses
- Prostheses (artificial limbs, etc)



Patient Isolation

Of course we go to the hospital when we are sick so that we can feel our best again. The cleaning staff at the hospital work very hard to keep the building as clean as possible. It is impossible, however, to ensure that every bit of bacteria is removed.

It is very important that everyone washes their hands with warm soapy water for 20 seconds or that they use the hand sanitizer dispensers that are accessible throughout the hospital. **Washing your hands helps prevent the spread of diseases!**

While in the operating room, you may see a patient wearing a special yellow gown and gloves.

The purpose of the 'special' gown is to keep any germs away from other people or items they come into contact with.

Depending on the type of germ, the patient may also be wearing a mask or hat as well.

The nurses and staff who are caring for an isolated/special patient must also wear special clothes. **The staff wear these clothes to protect themselves from any possible germs that the patient is carrying.** The staff will

wear a special yellow gown, mask, gloves, head covering, and eye shield. Sometimes they will be wearing a regular mask and other times they may have to wear a special mask. It all depends on the germs that the patient may be carrying. They may wear a cover for their shoes as well.



How to handrub (preferred method)

Rub hands for 15 seconds



1 Apply 1 to 2 pumps of product to palms of dry hands.



2 Rub hands together, palm to palm.



3 Rub in between and around fingers.



4 Rub back of each hand with palm of other hand.



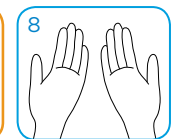
5 Rub fingertips of each hand in opposite palm.



6 Rub each thumb clasped in opposite hand.



7 Rub hands until product is dry. Do not use paper towels.



8 Once dry, your hands are safe.

How to handwash (when hands are visibly soiled)

Lather hands for 15 seconds



1 Wet hands with warm water.



2 Apply soap.



3 Lather soap and rub hands palm to palm.



4 Rub in between and around fingers.



5 Rub back of each hand with palm of other hand.



6 Rub fingertips of each hand in opposite palm.



7 Rub each thumb clasped in opposite hand.



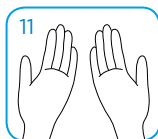
8 Rinse thoroughly under running water.



9 Pat hands dry with paper towel.



10 Turn off water using paper towel.



11 Your hands are now safe.

Follow your surgeon's instructions

- Stop any medications (including herbal medications and vitamins) that your doctor has told you to stop. Remember to take the ones that the doctor says are ok.
- Bring any items purchased for the surgery (ie. Special leg braces, etc)
- Tell us about any instructions that were not followed (ie. Child ate)

Your child **CANNOT** have anything to eat or drink after midnight the day before surgery. This includes chewing gum and candy.

The Surgery Day!

As a parent, you have the power to make this experience a good one for your child. Try to be as positive as you can. Be strong for your child. Get everything ready ahead of time so that you can get adequate rest the night before. On the morning of the surgery, try to get up a bit earlier than your child. Have a good breakfast so that you are better able to handle the day!

Be sure to ask any questions that are on your mind. If the question has a chance of scaring your child, you can ask to speak to us outside of the Paediatric waiting room. Most of our staff have children so we understand how you feel. Remember that you are not alone and that we are with you to help along the way!

Where do I wait?

You may wait for your child in our OR waiting room. It is located in the main hallway of

the 3rd floor. You walk down the main hallway of the 3rd floor, past 3B, and it is to the right.

How do I check on the progress of my child?

There is a volunteer in the OR waiting room during the day. They can phone in to the OR to ask any questions that you may have.

Your child is also issued a "TB" number when they come to the OR. The first part of the number reads, "TBOO" and the last six

digits are specific to your child. For example, your child's number may read, "TB00123456". There is a tv screen in the OR waiting room. You can look for your child's number and see how the surgery is progressing.



Surgery times are only estimated

We try our best to make sure that each surgery runs on time but this is not always possible. Sometimes the surgery before your child's surgery may take longer than planned. **Please be patient.** Everyone's anatomy is a bit different. If your child's surgery is taking a little bit longer, this is usually because your surgeon is trying to do the best job possible.

Can I grab a coffee and snack while my child is in the OR?

Of course you can! It is important that you stay nourished for your child. Visitors in our waiting area can eat and drink while they are waiting for their children. Before you go,

please ask the volunteer how long the surgery will be so that you can come right back to see the surgeon. Most times the surgeon wants to speak to you immediately after surgery. If

you do leave the waiting room to get something, keep an "ear open" as sometimes we have to page parents overhead on the intercom if we have a question that comes up.

Can I ask the surgeon questions after the surgery?

Absolutely! Please bring a pen and paper so that you can write down any postoperative (after surgery) instructions that the surgeon may give you. It also helps to write down any questions ahead of time as you may be anxious on this day. Please ask for simpler terms if you do not understand what the surgeon has told you. It is your right to understand what the surgeon is telling you.



What happens in the Recovery Room?

Right after surgery, your child will be brought to the recovery room. For young children, we call it the “wake up room”. The nurses in the recovery room are highly skilled and they have a lot of experience taking care of children. A nurse will be with your child at all times. She will give your child oxygen for a little while with a small mask. She will check your child’s blood

pressure and keep an eye on your child’s breathing. Some of the medication that the doctor gave your child to help her/him sleep can make them “woozy”. For this reason, they don’t want your child to move around too quickly. The nurse will encourage your child to lie down on the stretcher so that he/she doesn’t hurt himself/herself. The nurses will give your child medication

to help with any pain and to help nausea. The nurses will cuddle your child if they need a cuddle.

When it is time to go back to the Paediatric floor, the recovery room nurse will call the OR waiting room to let the parents/guardian know that their child is ready to go back. She will meet the parents/guardian at the elevator around the corner and they will go up together.

Families are not allowed in the recovery room, in order to respect the privacy of all patients, who are recovering from surgery.

When do we see the surgeon again?

The surgeon may want to see your child in his/her office a number of weeks following surgery. Paediatric outpatients may have the appointment date

on your discharge information papers. If there is not an appointment date written on your papers, you should call your surgeon’s secretary for a

follow-up appointment date. Remember to write down questions that you want to ask your doctor.

Recovering at Home

Your family made it through a busy and stressful day. Your nurse from the Paediatric outpatient department will give you information on how to look after your child at home. You may have been given a prescription to fill at your local pharmacy.

What can I give my child for pain?

Your surgeon may give you a prescription for a narcotic or he may tell you that regular Tylenol or ibuprofen is fine. **Be sure to follow the surgeon's instructions.** It is important to keep on top of your child's pain. Educate yourself on the medication that your child is taking. Only give your child the prescribed

amount. **Do not give more than the prescribed dose. You could dangerously overdose your child.** If you have any questions about your child's medication, your local pharmacist will be able to answer them. They can also suggest ways to encourage your child to take his/her medication. They know the side effects of

medications and they can make sure that anything prescribed is compatible with your child's other medications. It is important to bring all of your prescriptions to the same pharmacy so that they are aware of all medications taken by your child.

Are there any restrictions to my child's activity level after we get home?

Yes, there will be a few changes to the child's normal activity level:

- Quiet activities are encouraged for the rest of the day (ie. Lay on the couch and watch tv, play with their ipod, ipad, video games, read, puzzles, etc.)
- Supervise your child at all times for the rest of the day
- Normal activities can resume the following day (unless your surgeon has told you otherwise)



When to take your child to the emergency department

- You know your child better than anyone else. If you feel that something is wrong, contact your doctor right away. If you are unable to reach your doctor, take your child to the emergency department.
- If your child is throwing up or nauseated for longer than 6 hours, call your doctor or take your child to the emergency department.
- Your child may develop a slight fever after their operation. Give your child plenty of clear fluids and the medication that your doctor prescribed. If your child has a high fever and you are concerned, take your child to the doctor right away or to the emergency department.

****If you are concerned about your child, it is best not to wait until your follow-up appointment. Call the office and explain what you are worried about. If you cannot reach anyone at the office, go to the emergency department. *****

What can my child eat and drink after surgery?

- Your child needs to drink a lot to flush everything out of their system
- Clear fluids only (a clear liquid diet is made up of only clear fluids and foods that turn to clear fluids when they are at room temperature)
 - Water
 - Clear broth
 - Jell-O
 - Popsicles
 - Pure fruit juices without pulp (apple, cranberry)
 - Clear soda without fizz (ginger ale, sprite)
 - **NO MILK**
- Once your child is feeling fine after clear fluids, they can have a small meal such as soup with crackers or toast.
- Once the small meal is tolerated, nutritious whole foods can follow.

PROCESSED FOOD IS DISCOURAGED

Nutritious Foods that Help Healing

Eating the right foods after surgery can help your child heal a lot faster and with fewer complications. Eating healthy promotes healing and prevents constipation.

Processed food is not a good idea. Foods that are processed contain fat, sugar, salt and chemicals. They generally contain very small amounts of fiber, vitamins and minerals that keep us healthy and promote healing.



Foods that prevent Constipation

EAT THESE!

Whole grain breads
 Fresh fruit
 Vegetables (fresh or frozen)
 Cereal (look for high fibre, low sugar)
 Brown rice
 Chicken, turkey, pork
 Nuts
 Tofu
 beans

Foods that Cause Constipation

LIMIT THESE!

Cheese (eat in moderation)
 Milk and dairy products (eat in moderation)
 White rice
 **Processed food
 Sugary foods
 Red meat
 Chips
 pizza



We hope that, by answering some common questions, we have alleviated some of the anxiety associated with surgery. **Please remember to ask lots of questions as it is your right to do so. There are no silly questions when it comes to the health of your child.** Good luck with everything! We will be with you the whole way!

healthy together

At Thunder Bay Regional Health Sciences Centre, patients are first. As leaders in Patient and Family Centred care, we partner with patients and their families every step of the way to treat the person instead of the disease or injury. As an academic health sciences

centre, we teach the next generation of healthcare providers and advance medical research. Patients benefit from a team approach to care, and the chance to take part in clinical trials. Your donation to the Health Sciences Foundation advances care in all areas.

For information or to provide your input, please visit www.tbrhsc.net or contact 807-684-6000.



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Preparation Checklist for the Day of Surgery

Surgery Date: _____

Arrival Time: _____

(2 hours before surgery time. Please register at the Admitting Department (across from the information desk))

Surgery Time: _____

What to leave at home?

- Nail polish
- Jewelry
- Artificial nails
- Piercings (**must be removed** prior to arrival at the hospital)
- Expensive items



Preparation Checklist for Day of Surgery

What do I bring with me?

- Health Card ***
- Puffers if needed
- Comfort item (favourite toy, blanket, book)
- Proper carseat
- Empty favourite cup for drinking (after surgery)
- Comfortable clothing
- Case for glasses/contact lenses
- Any appliances (leg braces, splints, etc) that the surgeon has asked you to purchase for the surgery
- A healthy snack/drink for yourself while you are waiting
- Benefits card for pharmacy if you need a prescription filled
- Money for snacks and medication after surgery

You can print this list out, if you like, so that you remember what to bring with you. It will be a busy morning and it will be easy to forget something.**

