The Children’s Hospital
Children’s Day Care Ward
Level 1, Children’s Hospital, John Radcliffe Hospital

Children’s Hand and Plastic Injury Clinic (HAPI)
Level 0, West Wing, John Radcliffe Hospital

HAPI Children’s Clinic
(Hand and Plastics Injury)

Information for parents and carers
This leaflet explains the follow-on care after your child’s minor injury.

Your child’s injury will have been assessed by your GP or at a local Minor Injury/Emergency Department.

Following this assessment your child has been referred to the HAPI Children’s Clinic for an expert plastic surgeon to look at their injury.

**Where to come to**

Please come to the HAPI Children’s Clinic.

**Monday to Friday:**
This is in the Children’s Day Care Ward on Level 1 of the Children’s Hospital (John Radcliffe Hospital).

**Weekends and Bank Holidays:**
On these days the clinic is in the West Wing of the John Radcliffe Hospital, on Level 0. Follow the signs for Hand and Plastic Injury Clinic (HAPI Clinic).
Time

The Clinic runs from 12.00 (midday) until 2.00pm. You will be given an appointment time.

Please give your child a simple painkiller such as paracetamol (Calpol) one hour before coming to the clinic.

Date: ........................................................................................................................................

Time: ....................................................................................................................................... 

What will happen during the clinic

Your child will be assessed by the doctors and Advanced Nurse Practitioner. At the weekend you will be seen by the doctors and Specialist Nurse.

Possible outcomes following assessment

• Your child may only require a dressing.
• Further tests/investigations may be needed, such as an X-ray.
• A further follow-up appointment may be required.
• Your child may need an operation.

If your child needs an operation

We will try and organise the operation for the same afternoon, so please be prepared to stay.

If this is not possible, we will either give you a time for the operation to take place over the next few days, or will take a contact number to telephone you to let you know when your child’s operation can take place.
Fasting instructions

Please make sure that you follow the fasting instructions below in case your child needs an operation.

Fasting is very important before an operation. If your child has anything in their stomach whilst they are under anaesthetic, it might come back up while they are unconscious and get into their lungs.

Fasting instructions (for an afternoon operation)
Please follow these instructions carefully. If the instructions are not followed, this may result in your child’s operation being cancelled.

Infants under one year of age
• On the day before their operation or procedure your child may eat and drink normally.
• On the morning of the operation or procedure they may eat breakfast/drink cow’s milk, but it must be finished by 7.30am.
• They may drink formula milk before 9.30am.
• They may have breast milk before 10.30am.
• They should be encouraged to have a drink of water or squash (not fruit juice), to be finished by 11.30am.

Children over one year of age
• On the day before their operation or procedure your child may eat and drink normally.
• On the morning of the operation or procedure they may eat breakfast/drink cow’s milk/formula milk/breast milk, but must be finished by 7.30am.
• They should be encouraged to have a drink of water or squash (not fruit juice), to be finished by 11.30am.

Please do not give your child chewing gum or boiled sweets on the day of their operation/procedure.

If an operation is needed it should be in the afternoon.

If an operation is needed at any other time or on another day you will be given information about this and specific fasting instructions. Please ask if you are unsure.
Consent

If an operation is needed we will ask you for your written consent (agreement) for the operation to go ahead. If there is anything you are unsure about, or if you have any questions at all, please ask the doctor before signing the consent form.

Pain assessment

Your named nurse will use a pain assessment tool to help assess your child’s pain score after their operation. This is a chart which helps to gauge how much pain your child may be feeling. You and your child will be introduced to this assessment tool either at your child’s clinic appointment or on the ward before their operation.

Pregnancy statement

All girls aged 12 years and over will need to have a pregnancy test before their operation or procedure. This is in line with our hospital policy.

We need to make sure it is safe to proceed with the operation or procedure, because many treatments including anaesthetic, radiology (X-rays), surgery and some medicines carry a risk to an unborn child. The pregnancy test is a simple urine test and the results are available immediately. If the result is positive we will discuss this and work out a plan to support your child.
How is the operation carried out?

The operation is normally carried out under general anaesthetic. This means your child will be asleep throughout the operation. Depending on the injury, some older children may be able to have their operation with a local anaesthetic. This means that the procedure will be carried out with your child awake, using an injection of anaesthetic to make the injured area go numb. If this option is possible it will be discussed with you by the doctor at your child’s HAPI appointment. If your child is to have a local anaesthetic, please ask for the advice leaflet ‘What happens after your child’s local anaesthetic’.

The operation is normally done as a day case. This means that your child should not need to stay overnight in hospital. If your child does need to stay overnight in hospital after the operation you will be able to stay with them.

Anaesthetic Risks – general anaesthetic

In modern anaesthesia, serious problems are uncommon. Risk cannot be removed completely, but modern equipment, training and drugs have made general anaesthesia a much safer procedure in recent years. Throughout the whole of life, a person is at least 100 times more likely to suffer serious injury or death in a road traffic accident than as a result of anaesthesia¹. Most children recover quickly and are soon back to normal after their operation and anaesthetic. Some children may suffer side effects like sickness or a sore throat. These usually last only a short time and there are medicines available to treat them if necessary.

The exact likelihood of complications depends on your child’s medical condition and on the nature of the surgery and anaesthesia your child needs. The anaesthetist can talk to you about this in detail before the operation.
A nurse and one parent or carer can come with your child to the anaesthetic room. Your child can also take a toy or comforter.

It may be possible to give the anaesthetic with your child sitting on your lap. Your child may either have anaesthetic gas to breathe, or an injection through a cannula (a thin plastic tube that is placed under the skin, usually on the back of the hand). Local anaesthetic cream (EMLA or Ametop, sometimes known as ‘magic cream’), can be put on their hand or arm before injections so they do not hurt as much. It works well for 9 out of 10 children.

If the anaesthetic is given by gas, it will take a little while for your child to be anaesthetised. They may become restless as the gases take effect. If an injection is used, your child will normally become unconscious very quickly indeed. Some parents may find this frightening.

Once your child is asleep you will be asked to leave quickly so that the medical staff can concentrate on looking after them. The nurse will take you back to the ward to wait for your child.

Your child will then be taken into the operating theatre to have the operation or investigation. The anaesthetist will be with them at all times.
After the operation

Your nurse will make regular checks of your child’s pulse, temperature and wound. They will also make sure they have enough pain relief to keep them comfortable until they are discharged home.

Once your child is awake from the anaesthetic they can start drinking and, if they are not sick, can start eating their normal diet.

The minimum recovery time before discharge is 2 hours. This is usually enough time for us to check that your child is recovering well. It also gives us time to check that your child is passing urine (having a wee) after the operation. In some circumstances your child may be allowed home before they have passed urine. If your child has not passed urine within 6 hours of the operation, please contact the ward for advice.

Your child cannot go home on public transport after a general anaesthetic. You will need to take them home by car. This will be more comfortable for them and also quicker for you to return to the hospital if there are any complications on the journey home.

Occasionally, the anaesthetic may leave your child feeling sick for the first 24 hours. The best treatment for this is rest and small, frequent amounts of fluid and toast or biscuits. If the vomiting continues for longer, please contact your GP.

The hospital experience is strange and unsettling for some children, so do not be concerned if your child is more clingy, easily upset or has disturbed sleep. Just be patient and understanding.
Wound care and hygiene

We will give you specific wound care instructions before your child is discharged.

When you return home, please let us know if you are concerned about your child after the operation, in particular if you notice:

• any redness or swelling of the wound
• bleeding or leaking from the wound
• new or increased pain not relieved with regular analgesia (pain relief)
• your child has a fever (high temperature).

Please telephone us for advice on the contact details listed at the end of this leaflet if you have any concerns.

Additional wound care advice:
Getting back to normal

Your child will benefit from extra rest for a day or two after the operation.

We will talk with you if there is more specific recovery advice about your child’s injury.

Follow-up care

Please make sure you have enough children’s paracetamol and ibuprofen at home. Please see our separate leaflet ‘Pain relief after your child’s day case surgery’ for more information on how much and when to give pain relief.

Your nurse will tell you if your child needs a follow-up appointment. The letter confirming the date and time will either come by post or you will be given it before being discharged. Please speak to your child’s consultant’s secretary if this does not arrive within 1 month.
How to contact us if you have any concerns

If you have any worries or queries about your child once you get home, or you notice any signs of infection or bleeding, please contact us on the telephone numbers below.

**John Radcliffe Hospital Switchboard:**
Tel: 0300 304 77 77

**Children’s Day Care Ward:**
Tel: 01865 234 148
Monday to Friday, 7.30am - 7.30pm

**Hand and Plastic Injury Clinic, West Wing**
Tel: 01865 234 746
Weekends and Bank Holidays, 7.45am to 4.45pm

Alternatively, call the Hospital Switchboard and ask for bleep 6341, to speak to one of the Nurse Specialists during clinic hours.

Outside these hours, if you need urgent advice, please contact your local ‘out of hours’ service. This may be a GP service, NHS Walk-in Centre, NHS 111, a Minor Injury Unit or your local Emergency Department.

Information about urgent and emergency care in England can be found on the NHS Choices website or by calling the NHS 111 helpline (dial 111 for free from any landline or mobile).

Further information

You may find further information on the following website:

**NHS Choices**
www.nhs.uk/Pages/HomePage.aspx

**Suggested books and websites to help prepare your child for their visit to hospital.**
Please bring this leaflet with you on the day of your child’s admission.

We hope that this information is useful to you and would welcome any comments about the care or information you have received.

If you have a specific requirement, need an interpreter, a document in Easy Read, another language, large print, Braille or audio version, please call 01865 221 473 or email PALS@ouh.nhs.uk