

The Children's Hospital

Children's Day Care Ward

Robin's Ward / TDA (theatre direct admissions)

Children's Minor Injury Treatment

Information for parents



Introduction

This leaflet explains the follow on care after your child's minor injury.

Your child's injury will have been assessed by the team at the John Radcliffe ED (emergency department) / Witney MIU / Abingdon MIU (Minor Injuries Unit)

Where to come to

Please report to the children's minor injury clinic.

This is located at Theatre Direct Admissions (TDA), Robin's Ward, level 1 at the Children's Hospital (John Radcliffe Hospital).

There is a waiting area in reception, please press the buzzer to Robin's Ward. Tell the staff that you have arrived and please wait to be called.

Time

Please come to the clinic at 12.00 (midday).

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

Starving instructions

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

Starving 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 lungs¹.

Starving instructions

Please follow the instructions carefully.

- In the morning your child may eat breakfast/drink cow's milk but must be finished by 7.30am.
- He/she may drink formula milk until 9.30am.
- He/she may have breast milk until 10.30am.
- He/she can drink water or squash – not fruit juice until 11.30am.
- Please do not give your child chewing gum or boiled sweets.
- If an operation is needed it will hopefully be in the afternoon. Your nurse will be able to give you an approximate time when you arrive.
- If an operation is needed at any other time or on another day you will be given specific starving instructions. Please ask if you are unsure.

What will happen during the clinic

Your child will be assessed by the doctor and Advanced Nurse Practitioner. At the weekend you will be seen by the doctor and ward 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 requires 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 give you a time for the operation to take place.

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.

How is the operation done?

The operation is done under general anaesthetic. Your child will be asleep throughout the operation.

The operation is normally done as a day case. This means that they should not need to stay overnight in hospital.

However, in some cases your child may need to stay overnight in hospital after the operation. If this happens you will be able to stay with your child.

In the anaesthetic room

A nurse and one parent can come with your child to the anaesthetic room. Your child can also take a toy.

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 the hand or arm before injections

so they do not hurt so 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 your child. 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 your child at all times.

After the operation

Your named nurse will make regular checks of your child's pulse, temperature and wound, and also ensure he/she has enough pain relief to keep him/her comfortable until you are discharged home.

Please see our separate pain relief leaflet – 'Pain relief after your child's day case surgery' for more information. You can ask a member of staff for this leaflet.

Recovery from a general anaesthetic

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.

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

We will provide you with specific wound care instruction before your child is discharged.

These are:

Getting back to normal

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

We will discuss specific recovery advice about your child's injury.

Follow-up care

Please make sure you have enough children's paracetamol and ibuprofen at home.

Your nurse will tell you if you need a follow-up appointment – the letter will either come by post or you will be given it before discharge.

How to contact us if you have any concerns

If you have any worries or queries about your child once you get home or if you notice any signs of infection such as a raised temperature, increasing redness, pain or discharge from around the injury or any bleeding please contact us.

Contacts and telephone numbers

If you have any questions or concerns, please contact us.

Your named nurse is

John Radcliffe Hospital Switchboard: Tel (01865) 741 166

Children's Day Care Ward: Tel (01865) 234 148

Robin's Ward (TDA): Tel (01865) 231 254/5

Further information

You may find further information on the following websites:

- NHS Direct
<http://www.nhsdirect.nhs.uk/encyclopaedia/a-z/>

Reference:

- 1 From the Royal College of Anaesthetists (2003) Your child's general anaesthetic; information for parents and guardians of children. London: RCOA

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 need an interpreter or need a document in another language, large print, Braille or audio version, please call **01865 221473** or email **PALSJR@ouh.nhs.uk**

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