

## 4.6 Promote recovery and resilience

Children's memories of painful experiences are strong predictors of subsequent reports of pain intensity [41]. Due to this, it is important to end a medical procedure positively. It is recommended that the procedural support team take steps to:

- Reduce the child's distress before leaving the procedural setting
- Provide positive reinforcement of what went well during the medical procedure
- Promote appropriate rewards
- Ask if there is anything the child would like to try differently next time.
- Document the child's response to the medical procedure and procedural preferences to help inform subsequent interventions.

### ***Clinical tip***

If a child requires procedural sedation, remember that due to the amnesic effects they may need to be debriefed and given factual information about the procedure.

#### **4.6.1 When medical procedures do not go as planned**

Signs that a medical procedure is not going to plan may include [10]:

- Suggestions to restrain a child
- Raised volume of voices
- Multiple members of the procedural support team attempting to lead.
- A visibly distressed child
- Distressed family members
- An attitude of 'just do the procedure'

If a medical procedure does not go as planned ask yourself if you need to:

1. Rest
2. Reassess
3. Recover

### **Rest**

For long and/or challenging medical procedure you may need to provide the child an opportunity to have a short rest during the medical procedure then continue as planned if the child is able to tolerate this.

### **Reassess**

Assess the child's level of procedural pain and pain-related distress

Link: pain assessment and measurement

[http://www.rch.org.au/rchcpg/hospital\\_clinical\\_guideline\\_index/Pain\\_Assessment\\_and\\_Measurement/](http://www.rch.org.au/rchcpg/hospital_clinical_guideline_index/Pain_Assessment_and_Measurement/)

Consider if the medical procedure is not going as planned due to the technical skill of the proceduralist, inadequate analgesia or inappropriate non-pharmacological strategies. What strategies can be added or changed to promote the comfort of the child?

### **Recover**

Children may become so distressed during a medical procedure that they may require a longer period to recover. Vulnerable populations of children that may require special consideration for the length of recovery required are:

- Infants
- Children with poor physiological reserve ie. cardiac and respiratory conditions
- Unwell +/- unstable children

Ask yourself how urgent is the medical procedure and if there is a better way for the child.