## Following your child's appointment (Cont'd)

## DIET

- DO NOT feed your child until he/she is completely awake.
- Begin feeding with <u>clear</u>, <u>pulp-free liquids</u> such as water, apple juice, jello, popsicles or "sports" drinks.
- Start your child on <u>semi-solid foods</u> (such as soup, noodles, porridge, oatmeal) for easy chewing and digestion. Only feed your child if he/she is hungry and has tolerated clear liquids without vomiting.
- Avoid feeding your child large portions of food or fatty foods such as French fries.
- If your child vomits, stop feeding for 30-60 minutes then gradually resume clear fluids in sips.
- Normal diet can be resumed as soon as he/she is ready for it.

#### PAIN

- You will be notified if local anesthetic has been used during the procedure. It usually takes 2-3 hours to completely wear off. Make sure you monitor your child closely to avoid any soft tissue trauma.
- If he/she complains of pain, regular strength children's Tylenol or Advil/Motrin is usually sufficient.

In the mean time, please call our office immediately if your child:

- Cannot be aroused from his/her sleep
- Suffers from prolonged pain or fever that is not relieved by medication
- Experiences breathing problems
- Has uncontrolled vomiting
- Has a swelling that persists for more than 3 days.

Our contact numbers are:	Office	604-575-7785
	After Hours	604-649-0839



# INSTRUCTIONS FOR PATIENTS WHO WILL BE RECEIVING ORAL SEDATION

## **Goals of conscious sedation**

The goals of sedation in the pediatric patient for diagnostic and therapeutic procedures are: 1) to guard the patient's safety and welfare; 2) to minimize physical discomfort and pain; 3) to control anxiety, minimize psychological trauma, and maximize the potential for amnesia; 4) to control behavior and/or movement so as to allow the safe completion of the procedure; and 5) to return the patient to a state in which safe discharge from medical supervision, as determined by recognized criteria, is possible.

# The sedatives

We may use different sedative agents to sedate your child depending on the individual needs of your child. These may include any one or a combination of the following medications:

Midazolam (Versed)	
□ Meperidine (Demerol)	
□ Hydroxyzine (Vistaril)	

## Possible side effects of sedation

Not all children react the same way to the medication. This is affected by their individual physiology, temperament and anxiety level. Some minor side effects include sleepiness, vomiting, dry mouth, grumpiness, hyperactivity and anger. These are reversible when the medication wears off in a few hours. More severe side effects may include allergic reaction, respiratory and/or central nervous system depression. Our doctor will tailor the dose of the medication according to the response of your child at the first procedural appointment.

#### Paradoxical reaction to benzodiazepines (e.g. midazolam)

In susceptible individuals, midazolam has been known to cause a paradoxical reaction, a well-documented complication with benzodiazepines. When this occurs, your child may experience anxiety, involuntary movements, aggressive or violent behavior, uncontrollable crying or verbalization, and other similar effects. This seems to be related to the altered state of consciousness or *disinhibition* produced by the drug. Paradoxical behavior is often **not** recalled by the patient due to the amnesia-producing properties of the drug.

## Before your child's appointment

- MOST IMPORTANT!!! No solid foods or drinks for <u>6 hours before</u> your child's appointment. He/she may have a little bit of water to drink <u>up to 2 hours</u> before the appointment. Your child will not be treated if he/she has any food before the sedation appointment. If the child vomits during the treatment and has eaten food, we will be unable to complete treatment on that day and your child may need to be hospitalized for any complications.
- 2. Contact us prior to the appointment if there has been a change to your child's general health (such as a cough, cold, flu, fever, etc).
- 3. Please ensure that your child does not wear any nail polish as it may interfere with the monitoring equipment. Comfortable, short-sleeve clothing should be worn. This provides the required access for the placement of the blood pressure cuff. Turtle necks and stockings should be avoided.
- 4. **TWO** responsible adults should accompany your child to the sedation visit and must remain until treatment is completed. During your drive home, one person should sit in the back seat with your child to watch him/her during the ride. Travelling by public transit is usually not recommended.

## On the day of your child's appointment

The dose that your child will receive is based on his/her weight and will be administered at the office prior to the procedure. Timing of the medication is *paramount* so we ask that you arrive on time for the sedation appointment. While waiting for the medication to take effect, please watch your child closely in the waiting room. He/she may become groggy and uncoordinated and close parental supervision becomes necessary.

## Following your child's appointment

After the procedure is finished, the doctor and staff will evaluate your child's health status before he/she will be discharged home. Children recover from effects of sedatives at different rates so be prepared to remain at our office until the doctor has determined your child is stable and the after-effects are minimal. At discharge, your child should be responsive but may be drowsy, crying or fussy.

#### ACTIVITY

- It is okay if your child wishes to nap. He/she may sleep from two to four hours and may even be irritable for up to 24 hours after a sedation appointment. When your child is sleeping, it is important to place him/her on his/her side to prevent his/her airway from being obstructed. Periodically, awaken your child gently to ensure that he/she is easily arousable.
- Your child may be unsteady when walking or crawling. He/she will need your support in protecting him/her from injury. An adult must be with the child at all times for <u>at least four hours</u> after he/she arrived home.
- Your child should not perform any potentially dangerous activities such as riding a bike, playing outside unsupervised, handling sharp objects, working with tools or toys, or climbing stairs until he/she is back to his/her usual alertness and coordination.
- We advise you to keep your child home for the rest of the day. Your child may be able to return to school the next day.