

We understand your child's surgery can be stressful for your entire family. Our team of surgeons, anesthesiologists, and nurses partner with you and your child every step of the way. With us, your child gets expert, compassionate care from our pediatric surgery team. You can rest easy knowing each team member is specially trained to care for and address complex health issues in infants, children, and adolescents.

Studies have shown children who are well prepared for surgery often have a better experience, before and after their procedure. Read these tips to help best prepare for surgery day.

Do your research:

Get information about the specific procedure so you can explain things to your child. If you haven't already received them, ask for tips from the surgeon to prepare your child for the procedure. This will help ease any concerns or worries.

Ask the surgeon if your child can take any medicine before their procedure. This includes Tylenol and Motrin.

Make arrangements for your other children on surgery day. We can only allow two adults in the post anesthesia care unit (PACU) after surgery. For safety reasons, we cannot allow any other children in the unit.

Be ready for a call from our nurses a few days before surgery. They'll ask you some questions about your child's health and give you helpful instructions. You can call our front desk for your arrival and scheduled procedure time the business day prior to your child surgery between the hours of 12:00noon and 2:00pm at 410-266-6267.

DOS

You or another legal guardian must be available for your child at all times. Please plan on being with your child throughout the day.

You may stay with your child until the surgery and rejoin him or her as soon as it's safe.

At least one parent or guardian must stay on the premises at all times during surgery and recovery. When it's time to go home, we recommend two adults be present, one to drive and one to care for the child.

Packing List for the Hospital

- Your child's favorite comfort item, such as a blanket, stuffed animal or pillow.
- An activity to help decrease your child's anxiety before and after surgery.
- Formula, breast milk and an empty bottle or sippy cup for after surgery.

- Extra diapers or pull-ups if your child isn't toilet-trained. If your child toilet-trained in the last year or has issues with bed wetting an extra set of underwear or pull-ups is a good idea.
- A change of clothes for your child (he/she may wear pajamas to the center). Pajamas may stay on for minor procedures but we ask that they be **short sleeved**.
- Insurance cards, identification cards or any paperwork the team or doctor's office asked you to bring.

Eating and Drinking:

Eating or drinking outside these guidelines may cause your child's surgery to be delayed or cancelled for safety reasons. If you have any questions at all about your child's eating and drinking restrictions, please call our anesthesiology group as

Eating and drinking guidelines are important for your child's safety. Eating or drinking outside these guidelines could cause complications such as choking or vomiting in children who receive anesthesia. Try to keep food and drink out of sight since your child won't be able to eat or drink before surgery.

Infants to age 13

Eight hours before scheduled surgery time: Stop all solid food, including:

Baby formula.

Juice with pulp.

Hot or cold cereal.

Pudding.

Chewing gum, candy and mints.

Four to eight hours before surgery: Allow small amounts of clear liquids (i.e. water, Pedialyte, apple juice) or maternal breast milk.

Four hours before surgery: Your child should not eat or drink anything.

Adolescents age 14 to 17

Follow the standard adult eating and drinking guidelines before surgery. The prep nurse will call you before surgery to explain.

Stage Specific Care and What to Expect:

Infants 6-12 months

What to expect: Your child may be fussier than normal due to feeling hungry and not having anything to eat or drink. Your nurse or doctor will let you know when your infant can eat again after the procedure. **Please bring formula or milk with you.**

How to help:

Use sensory stimulation to soothe.
Provide a pacifier.
Bring a favorite blanket or stuffed animal.
Talk in a calming voice.
Hold or rock your child.

Toddlers: (1–3 years)

What to expect: Your child may become irritable and uncooperative due to feeling hungry and not having anything to eat or drink. While children may strongly assert their independence at this age, they still fear separation from their caretakers.

How to help:

Talk to your child about the procedure one or two days prior.
Use simple words to explain what will happen (“The doctor is going to fix ____ body part.”).
Let your child make some choices. Choices could include what items to bring from home, which arm to use when getting a blood pressure and what to eat after the procedure, when possible.
Bring a favorite item from home (blanket, stuffed animal or toy).

Keep food and drink out of sight. Toys and activities can distract toddlers as long as they don’t see any food or drink.

Be patient. It’s common for toddlers to be fussy or clingy during a hospital visit. Giving comfort and support can be very helpful.

Preschoolers (3-5 years)

What to expect: In addition to being hungry, your child may become anxious, jumpy or confused. It’s common for children in this age group to have fears and misconceptions about a hospital experience. They may think they did something wrong to cause the hospital visit.

How to help:

Talk to your child about the procedure two or three days prior to give him or her enough time to process the information.
Use simple words that your child knows to explain what body part the doctor will fix.
Encourage your child to ask questions and express feelings. Open-ended questions such as, “Tell me about the procedure you are going to have,” are a great way to discover and clarify any misconceptions.
Keep food and drink out of sight. Toys and activities can often distract preschoolers as long as they don’t see any food or drink.
Allow your child to bring a favorite item from home (blanket, stuffed animal or toy).

Be patient. It's not uncommon for preschoolers to regress during a hospital visit. Temporary behaviors like wetting the bed or sucking their thumb may arise.

School-Age and Adolescent Children (5-12 years)

What to expect: In addition to being hungry your child may express fear, anxiety and concern of bodily harm. While your child may have a better understanding of what is happening, he or she may still experience fears and misconceptions of bodily harm.

How to help:

Talk to your child about the procedure one or two weeks prior.

Use language your child understands while being honest and realistic.

Schedule a pre-op tour for you and your child. The more prepared you and your child feel, the less anxiety you'll both have on the day of the procedure.

Ask open-ended questions to address fears and concerns ("How do you feel about going to the hospital?") and give chances for your child to express feelings.

Allow your child to pack a bag for the day with comfort items like a stuffed animal, blanket, music or games.

Focus on the positive, like how much better your child will feel after the procedure.

Teens (13-18 years)

What to expect: It's common for teens to feel a loss of control over their surgery. While your teen understands what is happening, he or she may have concerns about body appearance or going under anesthesia.

How to help:

Involve your teen in all aspects of planning the surgery.

Encourage your teen to be an active participant in his/her health care by asking the doctor or nurse questions.

Talk to your teen about the surgery to clarify any misconceptions and allow him/her to express fears.

Focus on the positive, such as how much better your teen will feel after the surgery.

Common Concerns:

Anesthesia: Explain that the anesthesiologist is a doctor who will make sure your child doesn't feel anything during the procedure and will wake your child up when the procedure is done.

IVs: If your child is 8 years or older, a nurse may need to place a pre-op IV per doctors orders. While this is the standard, we can discuss special exceptions.

Pain: Encourage your child to choose coping techniques used in the past. It may help to develop a plan to use when your child feels pain (deep breathing, squeezing an object or hand, using imagination to "go" somewhere else, listening to music, and using TV or video game as distractions).

Additional Resources:

We recommend talking and doing small preparation activities such as coloring pages and some role-play to prepare your child. The more prepared your child is the less anxiety you both will have on the day of the procedure.

While we are not affiliated with Johns Hopkins, their Pediatric Surgery coloring book that is downloadable has great pages for pre-op activities for your child. Relevant pages are 4-9, 12, and 14-19.

https://www.hopkinsmedicine.org/johns-hopkins-childrens-center/patients-and-families/_documents/JHCC-Surgery-Coloring-Book-8.22.14.pdf

We reside on the Anne Arundel Medical Center Campus, and they have a great Pediatric Virtual Tour video that you and your child can watch. While we are not owned by them, and the locations are different the general information about the steps while you are preparing for, during and after surgery are universal.

https://youtu.be/_3IYeLYxNeA







