



So you want to know more about...

# Going to the Hospital

## What to Expect

For children anticipating minor and major surgeries, families can do much to make the event as least stressful for everyone as possible.

### **Information is always a good thing for parents and children.**

Be sure to consider your child's cognitive abilities. Children under five have a very fuzzy sense of time so if you say to them, "Next month you will go to the hospital for surgery," it may mean a long month of worry. Young children also can't comprehend what most surgeries entail, so saying, "The doctor will fix your ears," is better than a description of tiny tubes, knives, and anesthesia.

Parents should know what to expect in terms of anticipated discomfort and recovery time. Expect children

to be quite out of sorts when waking up from anesthesia. Children may be groggy, confused, combative, weepy, or all of the above. Ask your surgical team when the expects are likely to war off and how you can best help your child recover. Although seeing a child "helpless" is scary for any child, parents need to set aside their anxieties and present a calm and confident face to a child facing surgery. If your child is able to comprehend it, share information on a need-to-know basis. (Ages and Stages on the reverse side of this page has specific tips.)

**Bringing objects from home such as a favorite blanket, photos, or pajamas (as appropriate) can make a child more comfortable.** Hospitals have a host of unusual

sights, sounds, and smells. Keep in mind your child's comfort level and stamina when deciding who should visit—a parade of well-wishers may be overwhelming.

**Be sure to set up support networks for your child and yourselves.** Make a list of tasks you might need help with. Appoint a close friend to help you field inquiries and coordinate efforts. Parents of children who have been in similar situations can suggest coping strategies and offer reassurance. Designate a beloved family friend or relative to relieve you periodically during the recovery period. Asking for and accepting help before you are at your wits' end is the best way to ensure you will be 100% ready to help your child cope.

## Coping Considerations

Once a hospital stay becomes necessary, a few simple strategies can keep track of critical information:

- ▶ Small notebooks by the telephone at home and by the bedside at the hospital will help you keep track of drugs, side effects, symptoms, and any other timely issues.
- ▶ Pre-program telephone numbers into your cell-phone: your pharmacy, your helper friends', restaurants that deliver, etc.
- ▶ Bring reading material, coloring books, and small toys to distract you

and your child during all the waiting times.

- ▶ A journal (using pictures and/or words) is a great way for a child to document progress and feelings before, during, and after a hospital stay.
- ▶ Ensure websites and message boards are reputable sources *before* you start reading. Explore links related to major medical or early childhood organizations first and always check any medical advice with your personal physician.

### Further reading

- ▶ *Going to the Hospital* by Anne Civardi and Michelle Bates
- ▶ *Going to the Hospital* by Fred Rogers

# Ages & Stages: Helping Children Who Are Hospitalized

Kids of all ages, when faced with life hurdles, simply want to know, “Will I be okay?” Knowing what “okay” means to your child at any age will help you help them feel confident and secure.

**Infants** are very tuned into their parents’ emotional states, so it helps to be matter-of-fact about trips to the doctor and hospital. If you will have a hard time putting your child into the arms of a nurse before surgery, for example, ask your partner or spouse to take that role. Just as with a drop-off at child care, hesitation makes it harder for the child, *and* they are likely to recover from any tears as soon as they are out of sight. Keep routines for eating and sleeping as normal as possible before and after medical events, because consistency is comforting.

**Toddlers** have a widely varying range of verbal abilities. Parents can speak to children about going to the hospital in terms that are familiar from other contexts. For example, if you use the terms “Let’s fix it,” or “all better” to describe broken toys, you can use similar terms to talk about hospitalization. Some toddlers are highly verbal and parents must remember their cognitive limitations. Toddlers’ sense of time is sketchy, as is their ability to understand things they don’t have concrete experience with. Reading a book about going to the hospital can give them a point of reference, as

can a trip to the hospital pre-surgery. Visit the lobbies, say hi to hospital staff, and visit the gift shop or vending machines.

**Preschoolers** can often articulate their worries and ask questions about a hospitalization. They may act out anxiety or role-play medical situations in an attempt to work through their concerns. Books and videos about going to the hospital can be helpful, but some preschoolers are more interested in distractions from the upcoming stress. Doing fun things before the surgery and making plans to do them again after recovery helps kids frame their experience and be confident they’ll feel better.

**Kindergartners and school age children** are able to understand and anticipate improvement. Being able to say, for example, “Your ears might hurt a lot today but tomorrow it will be much better and next week they probably won’t hurt at all,” can be comforting. Older children are beginning to have a sense of their own mortality and may want to know specific risks. If you share much detail, be sure to share empowering information about how you and the doctors will be reducing any dangers and how your child will benefit from the treatment. Medical professionals empower school-age kids to help their own treatment by asking them to quantify their discomfort using smiley faces or a number scale.

## Frequently Asked Questions

**My child has stitches (scars, bruising, etc.) from a recent surgery that attract a stares and rude comments. How can I deal with these people tactfully without giving my child a complex?** First of all, remember that most people are concerned for your child’s well-being. If you accept their remarks in this vein, your child will, too. You might choose to tell people the specific thing that caused the marks, or you could say something vague, “He had to have surgery but he’s feeling much better.” Projecting a confident attitude will help your child feel confident. Children often forget about their bruises, stitches, or other marks of distinction. If your attitude is positive, they may even feel that all the extra attention is because they are so charming.

**My child had a major surgery. Although the doctors tell me she’s fine, I can’t forget it and want to keep her safe from any danger.** If your doctors have no concerns about your child’s activities, you should believe them. All kids need to explore his or her environment to learn about it and their place in it. Well-meaning but over-protective parents of any child (with

or without medical concerns) can send an underlying message that their child is less competent or capable than he or she really is. A psychological handicap may be more challenging to overcome than a physical one. **What should I say if my child asks, “Will it hurt?”** You should tell the truth, so your child will believe you about other things. You don’t, however, have to go into great detail. You could compare it to a known event, “Remember when you dropped that brick on your toes? This will probably hurt less.” You can also explain that pain-relieving medicines can do a great deal of good, and clarify that he won’t feel anything during the surgery itself because of anesthesia.

**How do I answer the question, “Will I die?”** If the surgery isn’t serious, the child may simply be asking, “How serious is this?” For young children who know they have serious conditions, they still want reassurance. The right answer is, “No!” in both cases. Parents should frame surgery as a life-affirming event rather than a dangerous one. Hospitals social workers have more specific suggestions for families facing serious illnesses.