Ted goes to hospital



When children need to go to hospital it can be an anxious time for the whole family. How you and your child react will depend on many factors, like how often they've been to hospital, their (and your) previous experiences with hospitals and medical professionals, where and for what reason they are being admitted, as well as their unique personality and approach to life.

Many people have little experience of hospital processes and find it difficult to know how best to support a child in this unfamiliar environment. That's why we created **Teach Ted**.

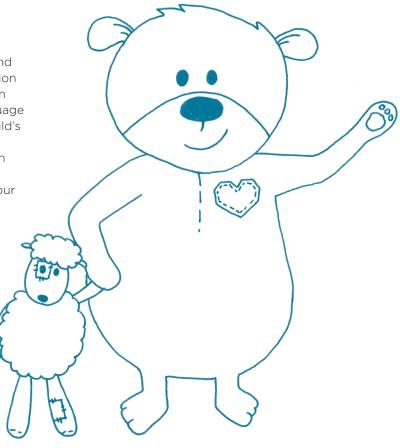
Use these tips along with the book *Ted goes to hospital*. Read the story with your child and travel virtually with them through Ted's hospital adventure, learning who they might meet and what might happen next. The book will prepare your child by positively engaging them in the whole experience, providing them with a safe space to ask questions and voice their concerns, and giving them coping strategies.).

The creators of **Teach Ted** have worked in consultation with the Child Life and Music Therapy Team at The Children's Hospital at Westmead, part of the Sydney Children's Hospital Network, to put together these tips. We provide you with suggestions on when and how to discuss an upcoming hospital admission with your child, the common areas of concern for children, how to interpret unfamiliar language and how best to respond to some of your child's more challenging questions. Most hospitals provide pre-admission information either with the paperwork you are given at the time of booking or on their website, but you know your

child better than anyone, so don't hesitate to ask questions of your care-givers. We've also included some additional resources that you might find helpful.

We hope that by travelling hand in hand with Ted along his hospital journey your child's experience will be easier and more familiar. Got a story you'd like to share? We'd love to hear from you. Visit us at teachted.com.au, on our socials @teachted, or write to us at chat@teachted.com.au

Sarah + Sare



When to use the book

Ted goes to hospital is a great story to read to kids at any time, not just in the lead-up to their own hospital visit. It's a helpful way for them to be prepared if they or someone they love needs to go to hospital unexpectedly.

We've provided some advice for planned admissions below, based on your child's age, but, as always, follow your own instincts! You know your child best.

Reading through the book is a great start. Have a look at the discussion points below for some of the common things that children are curious about and ways to explain them. Then, as you get to the relevant section of the book, use the conversation starters or try your own. Remember that 'I wonder' is a great sentence starter, letting your child take the conversation where they'd like to go.



For planned admissions for children under 6 years of age, it's usually recommended that you talk to them about their upcoming stay a few days beforehand. This allows time to tell them what is about to happen but not too much time for them to dwell on it. Keep your language simple and be truthful!

If it's been a while since your child has read about Ted's journey, or you've just received the book, reading through it a few times a day is a great way to build their confidence.

At this age, children are strongly influenced by how their parents and carers are responding to a situation, so try to find a time when you are feeling calm. If you have any concerns about what will happen, before you speak with your child we'd suggest you discuss this with your care-providers or other support people to make sure you are feeling confident.

For planned admissions for children 6 years and older, it can be valuable to tell them a week or two beforehand if you have the time. Start by reading the book with them, using each stage of Ted's experience as a launching point to tell them about their upcoming visit – what will happen, when, where and why it's important. At this age, children often like to think through things in their own time and come back to you with questions. If they have questions you are not sure how to answer, let them know this and talk about how you can find out what they want to know together, either through contacting your care team or looking through the suggested websites for more information.

Let your child read through the book by themselves if they'd like to, but also ensure that you spend time going through it together. It's a great conversation starter and children will often use Ted's experience as a way to share information or ask questions they may not feel comfortable voicing themselves.



Common areas of concern for children

Going to sleep and not waking up, or waking up mid-surgery

Children don't understand how anaesthetics work (in fact most adults don't). It can be helpful to explain that one reason the anaesthetist stays in the surgery room is to continually monitor the level of 'sleep medicine', keeping it just right so that the patient won't feel any pain. This can alleviate a child's fear of waking up during surgery.

A fear of not waking up after surgery can stem from that childhood experience of hearing language in one context and applying it to another. As adults speaking to children, we sometimes don't realise how often we use the same words to mean completely different things, because our adult thought processes distinguish meaning according to the context in which the words are used. For example, if you've ever had a sick pet and have had to make the decision to euthanise, you may have heard or even used the expression 'putting to sleep'. A child may be told that their favourite dog, Buddy, is being given some medicine to 'put her to sleep' so that she won't feel any more pain and won't wake

up again. So when you start explaining that an anaesthetist is going to give your child medicine that will put them to sleep so they don't feel any pain ... well, you get the picture!

Discussion points: As you explain what the anaesthesia machine does, have a conversation about how long Ted might be asleep and how the doctors will be able to tell how he's going. If you know how long your child is expected to be in surgery, try turning it into something they can relate to.

- 'I wonder how long Ted's operation will go for. Did you know that your anaesthetist will stay with you for the whole operation? They can adjust the medicine during the surgery if they need to and reduce the amount once the surgery is finished. That's when you'll wake up and we'll meet you in the recovery room.'
- Your doctor told me that your surgery will go for about two hours. That's about as long as your favourite movie.'

Feeling pain during the operation

Will the operation hurt?' is probably the most common question kids ask, as they've usually had previous accidents that resulted in their feeling pain. The answer will depend on a variety of factors, such as your child's pain tolerance, the type of procedure they will undergo and their emotional state when the general anaesthetic and any local anaesthetics wear off. The good news is that pain treatment for children is well researched. Your care team will use a variety of approaches during and after the procedure, and your practitioner can explain these to you before the procedure begins.

During the operation itself your child is most likely to be under a general anaesthetic or, if they need to be awake, may have been given either an oral, injected (local) or applied (cream) pain reliever or anaesthetic. After the procedure, the care team should also discuss ongoing pain management with you and provide any necessary prescriptions.

There are also many non-medicinal ways you can reduce your child's discomfort. These include distraction (for example, reading a story, singing a song, playing a game, watching a

movie), focusing on breathing, and practising mindfulness. This fact sheet from The Sydney Children's Hospital Network has some great tips: http://www.schn.health.nsw.gov.au/files/factsheets/childrens_painful_procedures_and_operations-en.pdf>.

Discussion points: It's important to be honest with your child. Don't tell them something won't hurt if you know it will. On the flip side, you don't want to scare them unnecessarily. When Ted is having his anaesthetic administered, you can discuss why the hospital staff might give Ted an anaesthetic and also that Dr Pickles, the anaesthetist, stays with Ted the whole time so that he gets just the right amount of medicine to make sure he feels no pain during the operation. You can also use this as an opportunity to discuss how you might manage any discomfort they might feel after the procedure.

- 'Some kids say it hurts a bit after they've woken up, but others aren't so bothered by it.'
- 'What sort of things make you feel better when you aren't feeling well?

Being scared when people are wearing masks

Most people you'll interact with in a hospital will be wearing a uniform, often 'scrubs'. In the operating theatre, and sometimes in the preparatory and recovery sections, staff will wear medical masks and caps. Some children can find it quite confronting to engage with adults wearing masks. This is often because kids are missing the cues of facial expressions when an adult's face is covered, making it harder for them to get the whole message. Or, in the movies or TV shows they've seen, the 'bad guys' wore masks that covered parts of their faces.

Discussion points: Masks and caps first appear in the book when Dr Giggles is introduced, and again in the operating theatre. Explain to kids that the masks and caps are important in helping to protect everyone from germs. In fact, it's likely that you and your child will be given a cap along with a gown! You might like to ask your practitioner for a mask, or buy a similar mask from the pharmacy so that you can try it on at home.

- 'Have you ever seen anyone with a mask like this? Why do you think they wear them?'
- 'It can be a bit tricky to tell how someone's feeling when we can't see their mouth. What other clues do you think we can use to tell that they are friendly?' (Talk about other ways you can tell, such as how their voice sounds, whether they have smiling eyes and by listening to the words they are saying.)

Waking up and finding that you are not there

All children handle new situations and new people differently, so your child may or may not be worried about waking up and you not being there. However, even children who are otherwise very independent and confident may be more sensitive in this situation, so it's worth bringing this one up. It is also generally observed that if a child goes under anaesthetic calmly they'll wake up calmly and, if they have been troubled as the anaesthetic gas is given, they are more likely to wake in a certain amount of distress. This is something that can be hard to watch as a parent, but rest assured that the distress they show is usually only temporary and most don't even remember it when asked about it later.

When children come out of anaesthesia they can be a bit disoriented and may take a few minutes to properly focus their eyes. As you can imagine, this can be scary for a child, so hearing a familiar voice can make a world of difference. Depending on the age of the child, the procedure they've had and the hospital, you might be asked to lie with your child or sit next to them as they wake up.

You will know best what is most soothing for your child – singing a special song, calling them by their pet name, telling them a story, or giving them a pat or stroke as you do to calm them at home. If you use signing to communicate, bear in mind that it may take a few minutes for your child's eyesight to focus, so consider tactile signing.

If possible, before you read Ted's story with your child, check with your practitioner or hospital whether you will be allowed to be in the recovery room when your child is woken up, or whether you will have to wait until shortly after or some time later to be reunited. If you're not sure you can be in the recovery room, you can always explain that you'll need to check with the hospital, and then let the child know exactly what will happen. If the hospital's standard approach is not to have the parent or carer in Recovery, then you have a right to ask if you can be there. They may say 'no' because of a procedural or medical requirement, but sometimes they may just not have a lot of experience with kids or not yet built this into their standard practices.

Discussion points: In most hospitals, you'll be asked to stay in the local area or possibly a specific waiting room and someone will either call or collect you once your child has been moved to Recovery. If you have a map of the hospital, you can share this with your child at the beginning of the story and look at the different parts of the hospital you'll be in as you talk through each stage of Ted's journey. Some hospitals also have virtual tours on their websites. It can be reassuring for your child to know that you'll be close by and that the hospital team will have your phone number so that they can call if they need to reach you quickly.

- 'What do you think I could do to keep myself entertained while you are having your operation?'
- 'I wonder what they'll bring you for lunch/ dinner afterwards.'

Don't let your fears become theirs

A parent's first thought is often to say to a child, 'Are you scared?' or 'There's no need to be nervous'. The intention is good – to acknowledge how they may be feeling and to talk it through. The problem is that, until you said it, your child may not even have thought they needed to be worried. As is common with young children, they look to you for guidance on how they should feel or react in a particular situation.

We recommend trying a more open, child-led approach:

- I wonder what will happen when ...
- I wonder who we'll meet at ...
- I wonder what we should pack ...

This allows your child to express what they are feeling or to explore questions they've been asking themselves, whatever those may be.

It's natural to feel anxious when your child is going to hospital. However, if you feel that your anxiety will come through in your conversations with your child, try to address your own concerns first, either by talking with your medical professional to address your specific worries, or practising some meditation or mindfulness. It may even help to have someone else explain things to your child and assist you to answer any questions your child has.

Useful resources

There's plenty of great information on government health and children's hospital websites. We've included some links below. Don't forget to ask your care-provider for their suggestions!

- www.schn.health.nsw.gov.au/ fact-sheets
- www.rch.org.au/kidsinfo/ fact_sheets/Preparing_ your_child_for_hospital/
- www.betterhealth.vic.gov.au
- www.childrens.health.qld.gov.au
- www.raisingchildren.net.au

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