Coping with Cannulation in ED
- using Positioning, Language and Distraction

Education Plan for 30 minute tutorial in ED procedure room

Goals - ED staff experienced in cannulation will be able to:
- Set up staff, equipment and room for procedure
- Prepare child and family for procedure
- Use techniques

Required Materials
- Small group - up to 12
- Procedure room
- Mannikin or doll
- Small blanket
- Pillow
- Sucrose
- Tourniquet
- Cannulation equipment
- Taping stickers

Introduction
Cannulation is a common procedure for children in the ED. Causes significant distress for the child and carers. Can lead to long term fear of hospital. In this session we will practice three types of techniques which give the child some control and can reduce fear and improve cooperation. They do not increase the time or difficulty of placing the cannula. They can be used by all ED staff. However, the child may still be distressed.

Set up
Talk through the steps for setting up for a cannula
- Staff - two staff - proceduralist and holder in addition to carer.
- Equipment - blanket for swaddling infants, sucrose for infants, pillow to support limb being cannulated, distraction tools. Cannulation and taping equipment set up on trolley.
- Room - decide which holding position to use and where to place adults, check trolley is in reach.

Positioning - see poster
This is the basis for all other techniques. On the poster you can see 6 holding positions which avoid laying the child flat with suggested ages for use. They each have a name to communicate which one you plan to use. Let’s practice them.
- Ask three staff to take on roles of proceduralist, holder and carer
- Ask them to position mannikin and people for the Swaddling Hold (wrap with blanket). Check proceduralist and holder can place tourniquet, hold firmly and reach equipment trolley.
- Repeat with another three staff for Hugging Hold. Carer is hugging child not restraining them. Use the pillow to give a stable surface for arm. Check the trolley is within reach.
- Repeat with another three staff for Koala Hold. This is especially useful for shielding vision of child and carer.
- Repeat with Looker then Non-looker Holds.
Coping with Cannulation in ED

Language - see poster

Discuss the following:

- We can reduce fear by explaining what is happening.
- Avoid using words indicating pain as this directs the child’s experience to include pain.
- Suggested words are neutral and familiar to children.
- Use ‘straw’ rather than ‘needle’ as children’s experience of needles is with vaccination.
- Be honest - Check out suggested answers to direct questions on the poster.

Ask one staff to talk to another staff member who pretends they are 5 years old. Use a different pair of staff for each point below, and discuss the language used in the group.

- Talking to a child in preparation for a cannula.
- During procedure - one person speaks calmly and quietly at a time
  - Avoid apologizing as this focuses on negative experience.
  - Give child an action and praise their efforts.
  - Avoid negative directions (Don’t move).
  - Comment on the next step so the child can see progression towards the end.
- After procedure - note how well the child performed to get through procedure.

Distraction - see poster

Discuss the distraction tools you have in your ED. Poster suggests simple distraction for age groups.

- Bubbles are most effective blown above the child not in their face.
- Sing a nursery rhyme.
- Talk about family, friends or favourite characters.
- Many carer’s have favourite activities on their phones.
- Avoid complicated distraction as you need to focus on the procedure.
- Offer Buzzy Bee if available- Place proximal to the cannulation site above the tourniquet.

Putting it all together

Watch one of the videos then ask staff to practice in groups of three.