



Nitrous Oxide sedation – procedures – children



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Cork Emergency Medicine

<http://EMed.ie>

This information sheet is for parents of children undergoing sedation with nitrous oxide for a procedure while in the Emergency Department (ED) at Cork University Hospital (CUH).

About sedation

Sedation is a medicine given to children to make them feel sleepy and relaxed. When nitrous oxide is used for sedation it is given as a gas that your child breathes in through a mask – it is otherwise known as 'laughing gas'.

Reasons for having sedation

Your child may become distressed and afraid when having certain tests or treatments. Fear can make his/her pain worse. Procedural sedation (sedation for procedures) aims to reduce your child's anxiety and fear. Children do not always sleep with sedation medicines. The sedation may make them feel sleepy and/or make them unable to remember the procedure. The procedure can then be done without causing too much distress for you and your child.

Permission to give sedation

As the parent or legal guardian we cannot sedate your child without your consent. You need to understand the reasons for sedation and the following risks:

What you need to know before consenting for sedation

1. A staff member will remain with your child until they are awake and if required, we will give your child oxygen through a mask or breathing tube;
2. Children may vomit. Very rarely, they may breathe the vomit into their lungs, which may require some specific treatment;
3. They may need to be treated with extra medicines such as anti-allergy medicine;
4. For your child's safety, do not take your child home until staff tell you it is safe to do so. Expect to wait for an hour or more after the procedure;

About Nitrous oxide

Nitrous Oxide is an anaesthetic gas commonly used for minor procedures in children in the ED. Nitrous Oxide is frequently referred to as 'laughing gas'. This gas will cause your child to become sleepy, dazed and easier to manage for procedures that require co-operation from the patient such as suturing (stitches). It may also cause some minor memory loss, which is generally related to the procedure itself (and is considered a good thing). The most common side effects related to Nitrous Oxide are vomiting or nausea, and this occurs in approximately 1 in 10 children. In the event of any side effect, your child will be managed by the ED staff until it is deemed safe for you and your child to be discharged home.

Helping your child

Helping your child before the procedure

- Check with the nurse or doctor before giving your child anything to eat or drink;

If you are concerned, please contact the Emergency Department you first attended:	Mercy University Hospital (021) 230 5011	M-UCC at SMHC (St. Mary's Health Campus) (021) 4926900	CUH (021) 4920200	Local Injury Unit Mallow General Hospital (022) 58506	Bantry General Hospital (027) 52900
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- Ask the doctor/nurse to explain the procedure to you and to your child;
- Before the procedure the ED staff (e.g. nurses and doctors) will try to help your child using interactive games, toys, playing with equipment, etc;
- Talk to your child about some ways to cope (for example – looking at an interactive book, using their imagination to be in a nice place, blowing bubbles);
- It helps not being too upset or nervous yourself – your child will notice this.

Helping your child during the procedure

- There will always be an ED staff member present during the procedure to help;
- Having a parent (or another adult) who knows the child stay with them is usually helpful;
- The level in which you will be able to engage/involve your child will depend on how deeply sedated your child becomes. Your child may need reminders of the coping methods you decided upon earlier (for example, “blow away the hurt”). This sort of distraction is very helpful;
- Giving your child a sense of control with some simple choices is helpful. We can allow them to choose things they may like e.g. music or video options, which finger the oxygen probe may be placed on;
- It is not helpful to allow your child to decide the exact moment the procedure is going to occur.

Helping your child after the procedure

- Remain with your child. They may not remember where they are or why they are in hospital;
- Focus on the good things your child did. For example “*you did a great job blowing away the hurt.*”
- You will be required to remain in the ED until fully awake and the doctor has discharged you.

Care of your child on your way home and for the next 24 hours

Sometimes the delayed effects of the medicines may make your child a bit confused, sleepy or clumsy for a while after the procedure. You need to be extra careful in caring for and supervising your child for the next 24 hours.

- If your child falls asleep in the car seat, watch them to make sure that they do not have any difficulty breathing. DO NOT leave your child alone in a car seat or alone in the car;
- Let your child sleep. Children may go to sleep again after getting home from the hospital. Sometimes children may sleep more because of the sedation medicine;
- Sometimes children may feel sick or vomit if they eat a big meal too soon after sedation. Give your child clear liquids such as diluted fruit juice, ice pops, jelly, clear soup, etc;
- Supervise all playing and bathing for the next 8 hours after getting home. DO NOT let your child swim or use play equipment (bikes, monkey bars, etc) that might cause an accident (for the next 24 hours).

Key points to remember

- Sedation is commonly used in children for procedures;
- The overwhelming experience we have (and internationally) is that it is very safe and very effective;
- You need to give consent before your child has sedation;
- Make sure you understand the reasons for and the risks of sedation;
- Be as open and honest as you can with your child about what is going to happen and it helps not to be too upset yourself.

When to return to the Emergency Department

Please return to the ED at CUH if your child:

- Vomits more than twice;
- Has strange or unusual behaviour;
- If you have any concerns.

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