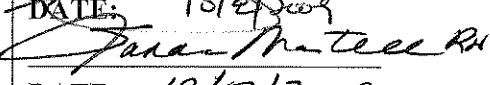


COOK COUNTY DEPARTMENT OF PUBLIC HEALTH POLICY AND PROCEDURE MANUAL		
POLICY TITLE: Restraining Uncooperative Children		POLICY NUMBER: 111-0601-96
DATE OF ORIGIN: 6.1.1996 DATE LAST RENEWED OR REVISED: 10.8.2009 NEXT REVIEW: 10.8.2010	<input type="checkbox"/> CORE POLICY <input checked="" type="checkbox"/> SERVICE UNIT POLICY	RELATED POLICIES:
APPROVAL BY CHIEF OPERATING OFFICER _____ N/A DATE:	APPROVAL BY SERVICE UNIT DIRECTOR(S) _____ DATE: 10/2/2009  DATE: 10/9/2009	PAGE 1 of 4

I. POLICY

In order to reduce the risk of potential injury and trauma to pediatric clients and staff, the Cook County Department of Public Health will implement the minimal level of control measures to restrain uncooperative children during necessary healthcare procedures such as phlebotomy, dental exams, and injections. Only the parent/legal guardian will be asked to assist in control measures. Any procedure that cannot be safely performed due to the behavior of the child will be stopped and the procedure rescheduled at a later date. After any procedure, the parent/legal guardian will be instructed to comfort the child. Children at community vaccination clinics will not be restrained without the parent/legal guardian being present and assisting in safely restraining the child. Children who become uncooperative at a community clinic will not be vaccinated and will be referred to a primary care provider.

II. SERVICE UNITS/AREAS/PERSONNEL AFFECTED

- A. Integrated Health Support Services
- B. Office of the Medical Director/Medical, Dental, and Laboratory Personnel

III. PROCEDURE

A. Laboratory

1. In the event a child becomes uncooperative/resistive prior to administering any laboratory test, Laboratory Personnel shall:
 - a. Instruct mother to remove child from laboratory and attempt to comfort/control child. (See Attachment A – Be There For Your Child During Shots).
 - b. Instruct mother to return to laboratory for testing if successful.
 - c. Request that charge nurse reschedule child for test, if mother was not successful.
2. Venous draws are to be done with the use of arm boards.
 - a. In the event a venous draw is unsuccessful on the first attempt the Laboratory Personnel shall:
 - 1) perform a hemoglobin test and lead level via heel/finger stick
 - 2) request charge nurse to reschedule child for laboratory test if unable to obtain sufficient quantity of blood for lead level test.

B. Immunization

1. In the event the child becomes uncooperative/resistive prior to administering any vaccination, Nursing Personnel will:
 - a. Instruct the mother to remove the child from the vaccination area and attempt to comfort the child. (See Attachment A – Be There For Your Child During Shots).
 - b. Discourage forms of punishment/negative reinforcement.
2. If the child remains uncooperative/resistant, the parent/legal guardian will be instructed on how to protectively restrain the child based on the child's age. (See Attachment B – Comforting Restraint).
3. If the parent/legal guardian is unable to effectively restrain the child or does not want to participate in restraining the child, the child will not be vaccinated and will be referred to a primary care provider for vaccination.

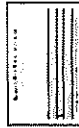
Attachment A

Steps to preparing kids



Before shots

- Infants:**
- Bring your child's immunization record.
 - Read vaccine information statements.
 - Ask any questions.
 - Bring along a favorite toy or blanket.
 - Stay calm—your baby picks up your feelings!
- Toddlers—All these, plus:**
- Reassure your child honestly: "It might sting but it will only last a few seconds."
 - Never threaten your child with shots: "If you are not good, I will have the nurse give you a shot!"
 - Encourage older siblings to reassure and comfort not to assure your toddler.



During shots

- Infants—Distract and comfort by:**
- Touching soothingly and talking softly.
 - Making eye contact as you smile at him/her.
- Toddlers—Also try:**
- Holding your child securely on your lap.
 - Talking to or singing with your child.
 - Helping your child take deep breaths and slowly blow out the pain.
 - Using a "hand puppet."
 - Pointing out pictures or objects around the room.
 - Telling your child a story or have him/her tell you one.
 - Allowing your child to cry don't force him/her to be brave.



After shots

- Infants—Comfort by:**
- Holding, cuddling, soothing, and/or breastfeeding.
 - Talking lovingly and soothingly.
 - Asking your doctor for advice on using a non-aspirin pain reliever when you get home.
- Toddlers—Also try:**
- Giving praises and hugs or a thumbs-up.
 - Reassuring your child that everything is okay.



At home

- Mark your calendar for your next appointment.
- Review vaccine information statements for possible reactions.
- A cool wet cloth can reduce redness, soreness, and/or swelling where the shot was given.
- Observe your child for the next few days. You might see a small rash or notice a fever. If your child has any reaction that concerns you, call your doctor or seek medical attention.
- To reduce pain or fever, your doctor may recommend you give your child a non-aspirin pain reliever.
- Also try giving your child a sponge bath with lukewarm water to reduce fever.
- Give your child plenty of fluids. It is normal if he/she eats less than usual for the next 24 hours.

COMMUNICATION
TECHNIQUES



A parent's love
makes all the difference.

Appendix B

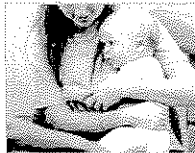
COMFORTING RESTRAINT

FOR IMMUNIZATIONS

• The method:

This method involves the parent in embracing the child and controlling all four limbs. It avoids "holding down" or overpowering the child, but it helps you steady and control the limb of the injection site.

• For infants and toddlers:



Have parent hold the child on parent's lap.

1. One of the child's arms embraces the parent's back and is held under the parent's arm.
2. The other arm is controlled by the parent's arm and hand. For infants, the parent can control both arms with one hand.
3. Both legs are anchored with the child's feet held firmly between the parent's thighs, and controlled by the parent's other arm.

• For kindergarten and older children:



Hold the child on parent's lap or have the child stand in front of the seated parent.

1. Parent's arms embrace the child during the process.
2. Both legs are firmly between parent's legs.

