

兒童麻醉家長指南

帶著孩子來到醫院就醫，可能令你跟孩子感到緊張和焦慮，在瑪麗醫院我們將盡力讓你的孩子得到安全及舒適照顧。我們希望以下的資訊能讓你們更了解院內的情況並減輕你們的焦慮。

醫療團隊

我們擁有專業醫療團隊來照顧你的孩子。他們當中主要有以下的一些醫護人員：

麻醉科醫生 — 是為孩子進行麻醉的醫生，他們將在手術期間及手術後全程照顧孩子的安全。麻醉科醫生會在術前評估門診或在病房與你和孩子會面。他們會向你們解釋麻醉的方法及程序。你們亦可詢問麻醉科醫生關於手術麻醉時的任何問題。

外科醫生 — 是為孩子進行手術的醫生。你們通常在門診部或病房見過外科醫生，他們會向你們解釋手術相關的任何問題。

病房護士 — 孩子入住病房的護士，他們會在術前及術後為孩子提供細緻的護理。

復甦室護士 — 手術結束後，在手術室內的復甦室照顧你的孩子的護士

，他們將密切觀察孩子的狀況，讓孩子感到舒適，直至孩子情況穩定，返回病房。

進入手術室

每個進入手術室內的孩子及家長都會有不同的反應。有些孩子會很容易與父母暫時分開，並跟隨護士進入手術室；有些則會很害怕而不願意離開父母。也有些孩子因為疾病的原因或治療的需求會出現情緒不穩定。這些表現因人而異，因此需要針對每個孩子的特點採用不同的方式。麻醉科醫生與你們會面時，會和你們一起制訂一個適合你們孩子的麻醉方案。

分散孩子的注意力

分散注意力是一個有效的方法。對一些年幼的孩子，用他們喜歡的玩具或毯子會有助於讓孩子放鬆；對大一些的孩子，可以用電子設備 (如手機) 分散孩子的注意力。

麻醉前藥物鎮靜

麻醉前可以用一些藥物令孩子放鬆或令他們輕度入睡，甚至會忘記何時進入了手術室。這些藥物非常安全，可以通過口服、滴入鼻孔或靜脈注射給予。或在少數情況下，若孩子不能配合上述幾種方法，也會經肌肉注射藥物。

父母需要一起進入手術室嗎？

當孩子進入手術室後，我們的首要任務是確保孩子的安全。如果有必要，我們可能會讓一位家長陪同孩子進入手術室，這樣可能會減輕孩子的焦慮。家長陪同孩子進入手術室內，首先自己要保持冷靜，不要過度緊張。麻醉科醫生讓孩子入睡後，手術室工作人員便會帶領你離開手術室到等候區。

年齡在6個月以內的嬰兒，就不需要家長的陪同進入手術室，因為這個年齡的孩子與父母分離時通常不會感覺到焦慮。如果你的孩子要進行緊急手術、病情嚴重、或你們非常憂慮，為了安全起見，你們在這些情況下便不適宜進入手術室。如果你的孩子已經接受麻醉前鎮靜藥物，並已經入睡了，那你就需要陪同孩子進入手術室，因為他們不會感到任何焦慮。

我們的首要任務是確保孩子的安全，是否需要家長陪同進入手術室，是由主診麻醉科醫生根據孩子的情況作決定。

如何令孩子入睡？

我們會使用最適合你的孩子的睡眠方法。

有時候，孩子會通過一個塑膠面罩吸入麻醉氣體入睡。當孩子吸入麻

醉氣體入睡時，孩子的眼睛可能會出現異常運動，也可能會作出一些奇怪的動作，而且呼吸聲會變得急促和嘈雜。這些都是正常的，你不必緊張。

有時候，孩子可能會在手術室先被置入一條靜脈導管。在置入靜脈導管前，我們會先在孩子手背上塗上局部麻醉藥膏，以減輕孩子在靜脈導管置入時的不適。靜脈注射麻醉藥後，孩子會很快入睡。

當麻醉科醫生確定孩子已入睡後，工作人員便會帶領你離開手術室到等候區。

當孩子醒來時，父母可以陪伴嗎？

手術結束後，孩子會被送至復甦室。復甦室護士會觀察及照顧你的孩子。孩子甦醒和情況穩定後，護士可能會讓家長進入復甦室陪伴。我們的首要任務是確保孩子的安全，是否需要家長陪同進入復甦室，是由主診麻醉科醫生根據孩子的情況作決定。當麻醉科醫生確認孩子完全清醒且情況穩定後，我們就會把孩子送返病房。


以上資料由瑪麗醫院麻醉，疼痛和圍術期醫學科兒童麻醉組提供



瑪麗醫院
Queen Mary Hospital

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PREPARING YOUR CHILD FOR ANAESTHESIA: INFORMATION SHEET

 瑪麗醫院 Queen Mary Hospital	Pamphlet Topic & Department Code
Ownership	QMH/Anaesthesia, Pain and Perioperative Medicine-1
Last review/revision	Aug/2024
Approval	HKWC Information Pamphlet Working Group
Distribution	As requested

PREPARING YOUR CHILD FOR ANAESTHESIA: INFORMATION SHEET

We understand that coming to hospital can be an anxious time for both you and your child. At Queen Mary Hospital, we are dedicated to ensuring that your child's care is as safe and comfortable as possible. We hope the following information will help you understand what will happen during your visit to the hospital, and will help to allay some of your anxieties.

Who will I meet?

The team of health professionals who are involved in looking after your child is very large, and it may be difficult to remember what everyone does. Below is a list of some of the people that you will meet.

Anaesthesiologists — These are the doctors who will look after your child and keep them safe during and immediately after surgery. You will meet members of the anaesthesiology team either in the preoperative assessment clinic or on the ward. During this time, the method of anaesthesia will be explained to you, and you or your child

will be able to ask any questions you have regarding what will happen on the day.

Surgeons — These are the doctors who will perform the surgery on your child. You should have already met members of the team in clinic or on the ward, where the surgery will have been explained to you.

Ward nurses — These are the nurses who will admit your child to the ward before surgery and look after your child before and after surgery.

Recovery nurses — These are the nurses who will look after your child immediately after surgery in the post anaesthetic care unit (PACU). They will monitor your child and ensure that they are comfortable until they are ready to go back to the ward.

Entering the operating room

All children and families react differently to coming into the operating room. Some children will happily separate from their parents and follow the nurse into theatre, others become very distressed and refuse to leave their parents. Some children have special medical conditions or needs that will impact how they deal with parental separation. Because everyone reacts differently, different techniques are used

for each child. When you meet your anaesthesiologist, with your input, an individual plan to suit your child will be made.

Distraction techniques

Often distraction techniques are useful. For small children, a favourite toy or blanket may help to relax them. For older children, electronic devices like a mobile phone can be helpful.

Sedative premedications

Anaesthesiologists sometimes use medicine that can relax your child or help them to forget leaving you to go into the operating theatre. These can be given as a drink, a spray into the nose, into an intravenous line if already in place, or in rare instances, if your child is at risk of hurting themselves or others, into the muscle.

Can I come into theatre?

When your child is in the operating theatre, our main priority is to ensure that they are safe at all times. If we feel that your presence will help relieve your child's anxiety, we sometimes allow one parent to be present during induction of anaesthesia. If you do come into theatre, the best way to help your child is not to be too overly emotional and to remain

outwardly calm. Once your child is asleep, a member of staff will accompany you out of the theatre.

With very small children (less than 6 months) we do not allow parents to come into theatre, as at this age, children are not usually affected by separation anxiety. If your child is having emergency surgery, is very sick, or you are too upset, for safety reasons it may not be appropriate for you to be present for induction of anaesthesia. If your child has received a sedative premedication and is already asleep, there is no need for you to accompany them into theatre, as they will not be upset by separation.

The decision as to whether or not you can come into the theatre will be at the discretion of the anaesthesiologist, as the safety of your child is our main priority.

How will my child go to sleep?

We induce sleep with a method that best suits your child. Sometimes children may go to sleep by breathing anaesthesia gas through a soft plastic mask. When watching a mask induction, you may notice that your child's eyes look unusual, they may make strange movements and their

breathing may become noisy or rapid. This is normal and should not alarm you.

Other children may have an intravenous (IV) line placed in the operating room. Applying a numbing local anaesthesia cream to the hand can lessen the discomfort of the insertion of the IV line. The onset of sleep is very rapid once the anaesthetic medicine is given through this line.

When the anaesthesiologist is assured that your child will not remember you leaving, a nurse will accompany you out of the theatre to the waiting area.

Can I be with my child when they wake up?

When the operation is finished, your child will be taken to the post anaesthetic care unit (PACU). Here they will be monitored and looked after by the recovery nurse while they wake up. We may allow you to come into the PACU once they are awake and medically stable. This will be at the discretion of the anaesthesiologist as the safety of your child is our main priority. When your child is awake, comfortable and medically stable, they will be discharged back to the ward.