

# Pediatric Comfort Techniques



Dane County Immunization Coalition Meeting

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# Purpose of Comfort Techniques

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Comfort measures for procedures and injections can decrease anxiety and distress for patients and parents.

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Provides parents a choice of assisting in the comfort positioning of their child during injections or procedures, increasing parental sense of shared decision-making in the care of their child.

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A child feels more in control when allowed to sit up vs. being held supine.

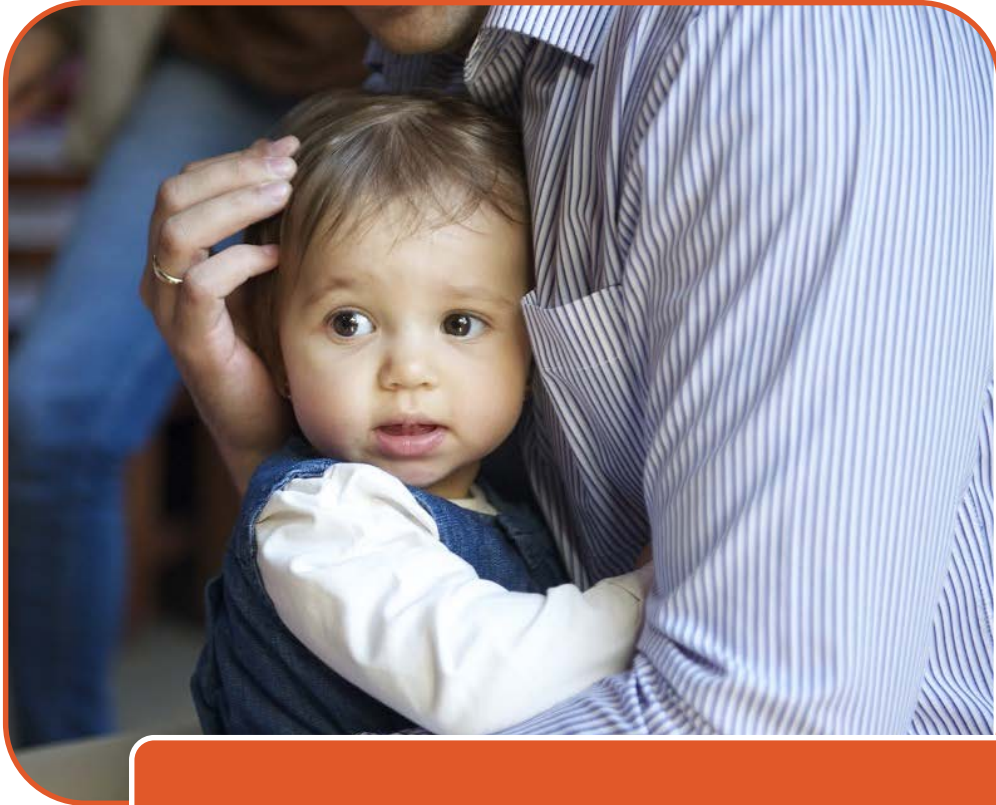
# Looking Back

- Restraining a child or holding them down has been shown to:
  - Increase stress and fear in the child, and
  - Increase pain perception due to fear
- As adults, these children may have persistent fear of needles and may delay health care
- As adults they may delay or decline immunizations for their child due to their own experiences



# Benefits

- Feels less vulnerable → decreased anxiety
- Child is less stressed → decreased pain response
- Parents holding the child, ready to comfort
- Parents do not have to watch the process, they are involved
- There is no documented increase in needle sticks using these methods



Comfort Holding Should Occur:

For each  
procedure or  
injection


- For all immunizations, medications, procedures

# Comfort Measures



## Clinical staff actions

- Positive attitude through facial expressions
- Soft and calm tone of voice
- Eye contact
- Single staff member talking
- Ordering of injections
- Rapid injection with no aspiration
- Encourage/reassure parents



The CDC recommends comfort restraint in the form of parental holding during injections

# INFANTS AND TODDLERS



# Infant Comfort Measures

Holding child

Swaddling

Sucrose 24% solution-up to 12 months

Breast feeding

Nonnutritive sucking

Distraction items-rattles, beads, flashlight



# Toddler Comfort Measures

Sitting on a lap, child held snugly

Reading stories

Singing songs

Videos

Bubbles, pinwheels

Positive instructions

# SCHOOL AGE CHILDREN

# School Age Comfort Measures

Positioning

Age appropriate preparation

Offer choices

Allow time for questions

Visual and auditory distractions

Ask questions

# MOVING INTO PRACTICE

# Preparing Clinical Staff

## Demonstrate holds

- Staff are more prepared when they can see the holds in action in a “safe” environment
  - Mannequins
  - Volunteer children

## Coaching staff/parent while immunizing an actual patient

- Being in the room-providing support, helping with positioning, parent coaching

## Class followed by in department support

- Provide guidance and reassurance

# Talking to the Parents

## Explain procedure

Be brief and factual. Keep it age appropriate when talking to the child

## Describe comfort holding and benefits with the parents

Including how they will need to hold their child

Parental anxiety can lead to the child becoming more anxious

## Share with the parents the options for holding their child

Side sitting in parents lap

Back to chest

Front to chest

Sitting on exam table with parent in front

## Offer options for pain management to parents

Sucrose solution or breast feeding for pain management

Pacifier – sucking is a natural pain reliever for an infant

## During the procedure

Encourage the parents to talk to the child about anything, instead of the procedure. Avoid saying “it won’t hurt”.

The background is a complex, abstract composition of overlapping, semi-transparent shapes and lines. The colors are a mix of warm tones (yellows, oranges, browns) and cool tones (teals, blues, purples, greens). The shapes are primarily circular and organic, with some straight lines and rectangular elements interspersed. The overall effect is a dense, layered pattern that suggests movement and interconnectedness.

**QUESTIONS?**



Thank You!

