

Systematic pain management needed for children in ER

October 29 2012



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(HealthDay)—Steps to manage pain and stress in pediatric emergency medical care are recommended, according to a clinical report from the American Academy of Pediatrics (AAP) published online Oct. 29 in *Pediatrics*.

Joel A. Fein, M.D., M.P.H., and colleagues from the AAP's Committee on Pediatric Emergency Medicine and Section on Anesthesiology and [Pain Medicine](#), examined pediatric pain management in all [emergency medical services](#) (EMS) agencies and provided guidelines for management of a child's distress during illness or after injury.

The researchers recommended that training and education in pediatric pain assessment and management should be provided to all members of

the EMS for children. Anxiety can be relieved by incorporation of child life specialists and others trained in non-pharmacological stress reduction. The presence of family may be viable and useful during painful procedures in the [acute care](#) setting. Pain assessments should occur from EMS admission through discharge. Analgesic and [anesthetic](#) administration should be as painless or pain free as possible. Pain prophylaxis should be given to neonates and young infants. Pain medication should not be withheld from patients with [abdominal pain](#), as it does not interfere with the ability to assess patients. Patients undergoing painful or stressful procedures in the emergency room should be given sedation or dissociative anesthesia. As part of the systematic approach to pain management, emergency departments should include sedation competencies in recredentialing procedures and develop protocol, policies, and quality improvement programs.

"A systematic approach to pain management and anxiolysis, including staff education and protocol development, can provide comfort to children in the emergency setting and improve staff and family satisfaction," the authors write.

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Citation: Systematic pain management needed for children in ER (2012, October 29) retrieved 26 April 2024 from <https://medicalxpress.com/news/2012-10-systematic-pain-children-er.html>

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