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## Assess the procedural communication techniques nurses uses during painful procedure of children in paediatric ward

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### Abstract

**Background:** When children and young people present to healthcare environments, they are faced with a range of emotions, from fear to anxiety, all which are potentially exacerbated by unfamiliar surroundings, people and equipment. Age appropriate communication to the child during any procedure can make the child understand at their level about the procedure. The study aimed to assess the procedural communication techniques nurses uses during painful procedure of children in Paediatric ward of Aims, BBBSR.

**Method:** The observational study was done on 60 events of blood sampling and intravenous cannulation among children in Paediatric Ward of AIIMS, BBSR using a Checklist for Paediatric Procedural communication. Purposive sampling technique was used.

**Result:** Among all participant nurses 55 (91.6%) explained the procedure to the children before doing, 45 (75%) nurses avoided negative words during the procedure. 55 (91.6%) nurses gave choices and empower. 40 (66.6%) nurses allowed children's independence and 15 (25%) nurses allowed to play and get familiar with certain equipment. Maximum nurses 50(83.3%) were used of distractor along with communication.

**Conclusion:** Majority of the nurses used age specific communication techniques during procedures with the children.

**Keywords:** blood sampling, communication, procedure

### Introduction

When children and young people present to healthcare environments, they are faced with a range of emotions, from fear to anxiety, all which are potentially exacerbated by unfamiliar surroundings, people and equipment. Compared with adults, children have fewer coping mechanisms and when experiencing pain or illness, distress levels often escalate causing a flow on effect to not only parents and caregivers, but healthcare providers alike. When attempting painful or uncomfortable procedures, such as taking blood, or even in some circumstances, obtaining vital signs, can cause negative emotional or behavioural consequences. Nurses are the one who are doing all the daily procedures for the child, during sample collection or IV cannulation it is very important to distract the child. Age appropriate communication to the child during any procedure can make the child understand at their level about the procedure, divert their mind from painful procedures. Communication during procedure can indirectly help the child to easily cope up with hospital routine procedures, and make nurse child relationship stronger.

### Methodology

The goal of the study was to assess the procedural communication techniques nurses uses during painful procedure of children in Paediatric ward of AIIMS, BBBSR. Any blood sampling events and intravenous cannulation events in paediatric medicine and surgery ward were included and all other painful procedures occur in paediatric wards were excluded in this study. Total 60 events of blood sampling IV cannulation were included in this study.

Self-made observational checklist was used to collect data using purposive sampling. Informed consent was taken from all the eligible nurses and all the events of blood sampling and iv cannulation performed by nurses were observed. The checklist was having four components like explain the procedure, avoid negative words, give choices and empower

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and Use of distractors along with communication. Data was analysed using descriptive statistics like frequency and percentage using SPSS 19. Ethical permission was taken from institutional Ethical Committee and Department of Neonatology. The tool was validated by 5 experts of Department of Dental Surgery, Department of E.N.T, Faculties of College of Nursing and the given suggestion was done. The tool reliability was checked and reliability

was (r = 0.80).

**Findings**

The analysis of the data was done based on the objective of the study, i.e., to assess the procedural communication techniques nurses uses during painful procedure of children in Paediatric ward of AIIMS, BBBSR. The presentation of the analysed data was as follows:

**Table 1:** Frequency and percentage of registered nurses using age specific procedural communication

S. No.	Variables	Yes f (%)	No f (%)
1	Explain the procedure	55 (91.6%)	5 (8.4%)
	Language known to the child	20 (33.3%)	40 (66.7%)
	Involvement of the child in process	10 (16.6%)	50 (83.4%)
	Allow to ask questions	20 (33.3%)	40 (66.7%)
	Answer in a simple manner	5 (8.33%)	55 (91.6)
2	Avoid negative words	45 (75%)	15 (25%)
	Word like ‘hurt’/’sting’	30 (50%)	30 (50%)
	Use of affirmative language	15 (25%)	45 (75%)
3	Give choices and empower	55 (91.6%)	5 (8.3%)
	Allow child’s independence	40 (66.6%)	20 (33.4%)
	Allow to play and get familiar with certain equipment’s	15 (25%)	45 (75%)
4	Use of distractors along with communication	50 (83.3%)	10 (23.3%)
	Age appropriate distractors	30 (50%)	30 (50%)
	(Breastfeeding, squeeze toy, bubbling, games, music etc.)	20 (33.3%)	40 (66.7%)

Table 1 shows 55 (91.6%) explained the procedure to the children before doing. 20 (33.3%) nurses used a language known to the children, 10 (16.6%) nurse only involved children during the procedure, 20 (33.3%) nurses allowed children to ask question and only 5 (8.3%) answered the children in a simple manner. 45 (75%) nurses avoided negative words during the procedure. 55 (91.6%) nurses gave choices and empower. 40 (66.6%) nurses allowed children’s independence and 15 (25%) nurses allowed to play and get familiar with certain equipment’s. Maximum nurses 50 (83.3%) was used of distractor along with communication.

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**Discussion and Conclusion**

The present study aimed to assess the current procedural communication practices among nurses during any painful procedures of the children in Paediatric ward of AIIMS, BBBSR.

It can be concluded from the nurses that majority of the nurses used age specific communication techniques during procedures with the children. Nurses even used parents as a distractor to the pain during procedure. Parents were also involved for communicating with the children during the procedure. The main reason behind nurses not using age appropriate communication was emergency cannulation or blood sampling, so time act as a constraint for nurses using age appropriate communication.

**Recommendation**

A similar study can be conducted on Intensive care unit. A protocol based on age appropriate communication for paediatric ward.

**References**

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