Reduced Use of Sedation in Child Patients who Needed MRI Scan by Psychological Preparation and Support from Child Life Specialists in UCH

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Introduction
Sedation was routinely prescribed to young children who needed MRI scan in order to help them stay still throughout the process. Chloral hydrate is the most commonly prescribed sedative drug but side effects were reported occasionally. Some children failed to fall asleep and displayed disruptive behaviors and confusion. In 2012, Child Life Specialists (formerly named Hospital Play Specialists) were deployed to the Paediatric Department under the joint collaboration with Children’s Cancer Foundation and UCH. Oversea experience showed that children as young as 4 years old could benefit from Child Life support and develop skills to complete MRI scan without sedation. The paediatric team saw the potential to reduce use of sedation by including assessment and support from Child Life Specialists. From 2012 to 2015, use of sedation was reduced 25% after the introduction of Child Life services and success rate is 91.5% in the group older than 5 and with normal cognitive functioning.

Objectives
Reducing use of sedation in child patients who needed MRI by introducing assessment and interventions given by Child Life Specialists. Non-pharmacological interventions could avoid potential risk of sedative drugs, reduce need of nursing care at post sedation period, and allow children and families learnt from the positive experience and be more confident in future medical encounters.

Methodology
This is a retrospective study which reviewed the use of sedation among patients who were admitted to the day ward for MRI from October 2012 to September 2015 where Child Life Specialists were included in the assessment and care.

Result
The yearly admission for MRI at Paediatric Day Ward was around 200. Child patients under 9 years old or with other considerations would be sedated before their MRI scan. In the three year from October 2012 to September 2015, total number of patients admitted to Day Ward for MRI is 631. Child Life Specialists worked together
with paediatric team and EDU team to facilitate young children to understand the procedure, manage their anxiety and develop coping skills. 159 out of the 631 children did not receive any sedation and could stay still throughout the imaging process. Need of sedation was reduced 25%. Child Life support was most effective among those aged over 5 and with normal cognitive level. Data in 2015 revealed that 35 patients fell in this targeted group and only 3 of them required sedation, the success rate was 91.5%.