Having Surgery at Children’s National Sheikh Zayed Campus
Frequently Dialed Phone Numbers

<table>
<thead>
<tr>
<th>Department</th>
<th>Number/Extension</th>
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<tbody>
<tr>
<td>Anesthesia and Pain Medicine</td>
<td>202-476-2025</td>
</tr>
<tr>
<td>Blood Donor Center</td>
<td>202-476-5437</td>
</tr>
<tr>
<td>Child Life Specialist</td>
<td>202-476-5665</td>
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<tr>
<td>Consumer Affairs/ Ombudsman</td>
<td>202-476-2885/2625</td>
</tr>
<tr>
<td>Family Library</td>
<td>202-476-4055</td>
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<tr>
<td>Financial Information Center</td>
<td>202-476-5002</td>
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<tr>
<td>Hospital Operator</td>
<td>202-476-5000</td>
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<tr>
<td>Laboratory</td>
<td>202-476-2226/5915</td>
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<th>Department</th>
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<tr>
<td>Language Services/Interpreters</td>
<td>202-476-5444</td>
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<tr>
<td>Pastoral Care/Chaplain</td>
<td>202-476-3321</td>
</tr>
<tr>
<td>Patient Experience Liaison</td>
<td>202-476-6160</td>
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<tr>
<td>Pre-Operative Care Clinic</td>
<td>202-476-7622</td>
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<tr>
<td>Pre-Surgical Tour</td>
<td>202-476-3812</td>
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<tr>
<td>Recovery Center/Wake-up Room</td>
<td>202-476-2031/5122</td>
</tr>
<tr>
<td>Surgical Preparation</td>
<td>202-476-3327/3370</td>
</tr>
<tr>
<td>Surgery Registration/Family Waiting Room</td>
<td>202-476-3456</td>
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Please ask a staff member if you need to reach another department, or call the main hospital operator at 202-476-5000.

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**ILLNESS CONCERNS**
Your child must be healthy for surgery. Tell us if your child is experiencing the following:
- Runny nose
- Cough
- Fever
- Diarrhea
- Vomiting
- Breathing problems
- Wheezing

We need to know about these concerns, even if you already have spoken with or seen your child’s pediatrician or another doctor.

**PRE-SURGICAL HISTORY AND PHYSICAL**
- Have your child’s primary care doctor do a pre-surgical history and physical completed 7 to 14 days before surgery
- N/A

**PRE-OP CALL**
Our surgical preparation nurses will call you 2 days before surgery between 3:00 pm and 9:30 pm. **Write on this sheet when you take the call**. Fill in the corresponding boxes for when your child needs to stop eating and drinking and tell the surgical preparation nurse the following:
- Any medical conditions or diets that may be relevant
- All recent hospital, emergency, and pediatrician visits
- Medications and allergies
- Current health problems or illness concerns

If you have not received a call by 9 pm, 2 days before surgery please call 202-476-3370.

**ARRIVAL AT CHILDREN’S NATIONAL**
Come to the Center for Surgical Care on the second floor. Arrive on time to allow for final, safe preparations before surgery.

**STOP DRINKING CLEAR LIQUIDS**
Stop drinking clear liquids 2 days before arrival time. Absolutely nothing by mouth now, or surgery may be canceled. Check nearby surroundings for any food or drink that your child could reach.

**STOP BREAST MILK, MILK AND FORMULA**
Stop drinking breast milk 4 hours before arrival time. Stop drinking milk and formula 6 hours before arrival time.

**STOP ALL FOODS AND CANDY**
Your child’s stomach must be completely empty to prevent serious problems during surgery.

**MUST BRING ON DAY OF SURGERY AT CHILDREN’S NATIONAL**

**Dr. Bear’s Patient Name:**

**YOUR CHILD'S SURGERY WILL BE CANCELED IF:**
- The legal guardian or biological parent is not present and does not have an ID
- History and Physical Form (H&P) is not complete
- NPO guidelines are not followed. Surgery will be cancelled if your child…
  - Had milk or formula within six hours of arrival
  - Had breastmilk within 4 hours of arrival
  - Had clear liquids within 2 hours of arrival

**CALL 202-476-7622 or 202-476-3370 MONDAY-FRIDAY to discuss any new problems with us.**

**DATE OF SURGERY**

**ARRIVE AT CHILDREN’S NATIONAL**

**STEP 1**

**STEP 2**

**STEP 3**

**STEP 4**

**STEP 5**

**STEP 6**

**STEP 7**

**STOP ALL FOODS AND CANDY AT 12 MIDNIGHT**

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Children's National Health System
111 Michigan Ave NW
Washington, DC 20010
OK TO HAVE
the following clear liquids
UP TO 2 HOURS BEFORE ARRIVAL TIME
✔
Water and clear soda
(such as Sprite®)
Sports drinks
Apple juice
Jell-O®
Gelatin without fruit
Popsicles

DO NOT HAVE
any food or candy after midnight
ON THE DAY OF SURGERY
✘
Meat
Egg
Cereal
Candy

BEFORE SURGERY AT CHILDREN'S NATIONAL
MORE DETAILED INFORMATION IS AVAILABLE IN YOUR "HAVING SURGERY" BOOKLET.

You may talk to a member of our team Monday through Friday: call us at 202-476-2031.

Milk
Formula
Breast Milk

Breast Milk
Formula
Milk
Checklists and Important Reminders

TO AVOID DELAYS OR CANCELLATION OF YOUR CHILD’S PROCEDURE, YOU MUST:

- Have a legal guardian or biological parent and I.D.
- Have a completed History and Physical Form (H&P) **one week before** the procedure
- Follow NPO guidelines:
  - STOP all food and candy at 12 midnight
  - STOP milk and formula 6 hours before stated arrival time
  - STOP breast milk 4 hours before stated arrival time
  - STOP clear liquids 2 hours before stated arrival time

Preparing for your child’s surgery:

**One month before surgery**

Below are some helpful tips to prepare for your child’s surgery. Children's National Health System recommends reviewing this checklist as soon as your child’s surgery is scheduled.

- Have I scheduled a physical exam with my child’s primary care physician within 30 days before the operation?
- Has my primary care physician completed and signed the medical history and physical examination form?
- Have I notified Language Services if my child, family, or I have special communication needs, such as hearing impairment, visual difficulties, foreign language translation, or other need?
  - Language Services: 202-476-5444
- Have I received authorization from my insurance company for the operation, if required by my insurance contract?
- Have I discussed my child’s medical history with the surgeon?
  - The reason for the surgery
  - Medications my child is taking
  - Allergies to medicine, food, or latex
  - Reactions to anesthesia or to a blood transfusion
  - History of nausea after anesthesia or medication
  - Immunization record
  - Previous illnesses or operations
  - Previous hospital stays (admissions), tests, or treatments
  - Anything that might put my child at risk during the hospital visit
  - Have I asked my surgeon about any special equipment I may need at home after surgery?
  - Have I arranged for someone to care for my other children while I am at the hospital?
  - For families coming from out of town: have I called Concierge Services at 202-476-6160 for help making travel and lodging plans?
  - Have I considered contacting the surgical Child Life Specialist at 202-476-5665?

**One day before surgery**

- Does my child have a cold, a fever, a rash, or fever blister? If so, please call the surgeon immediately. The operation may be postponed.
- Have I talked with my child about the operation?
- Have I reviewed the information about the surgery, anesthesia, and “Tips for Preparing Your Child” online?
- Has my child taken a thorough bath or shower and removed all make-up, nail polish, piercings, other jewelry, and contact lenses?
For post-surgical care at home: do I have plenty of clear drinks, such as water, sugar water, Gatorade, Jell-O, apple juice, pulp-free juices, breast milk, Pedialyte, popsicles?

Do I have a supply of acetaminophen at home?

Have I planned quiet games and activities for my child for after the surgery?

Have I made arrangements for transportation to and from Children’s National? Do I have directions? Visit ChildrensNational.org for personalized directions.

Have I made arrangements to be with my child or have another adult present while my child recovers at home?

Have I arranged for someone to care for my other children while I am at the hospital?

If I need to cancel my child’s surgery, have I contacted the surgical coordinator? Phone: 202-476-3370

Do I have all of our insurance information ready to bring with me to the hospital?

I was called by Children’s National and was unavailable; did I check my voicemail and return the call to 202-476-3370?

What to bring on the day of surgery

Please make sure you bring the following information to check in and register:

- Picture identification card (for parents and patients over 18)
- Insurance card for the patient
- Statement of non-availability, if covered by TriCare
- Referral/authorization, if covered by an HMO
- Proof of guardianship (foster parent papers, court orders) if you are not the biological parents of the patient
- The “Consent to Surgery” form that your child’s surgeon gave you (as applicable)

- The original medical history and physical (H&P) exam form completed by your primary care physician (as applicable)
- Any outside X-ray or other imaging films and/or lab results (as applicable)

Other items to bring for the comfort of you and your child:

- Comfortable clothing and a change of clothes
- Your child’s medications; parent/caregiver medications
- Containers for glasses, contact lenses, or any assistive devices such as hearing aids
- Your child’s favorite toy, blanket, or comfort item (Please limit to one item)
- Special bottle, nipple, pacifier, or sippy cup for after surgery
- Something to occupy your time while you’re waiting such as a cell phone and charger, magazines, knitting, or your laptop computer. A free wireless network called “Bear Air” is available to our guests.

Do NOT bring:

- Valuables, such as jewelry
- Food or drink into the Surgery Center
- Siblings and other relatives or friends

Due to space constraints, we must limit the number of people coming to the hospital to two parents/guardians and the patient. If your child will be staying at the hospital after the surgery, the nursing team will advise you when other guests are permitted.

If eating and drinking guidelines are not followed, your child’s surgery will be delayed or cancelled for your child’s safety.
Welcome to Children’s National Health System

Thank you for choosing Children’s National Health System for your child’s care. Children’s National is the only hospital in the region dedicated exclusively to children. Our surgeons operate exclusively on children and they have the highest level of pediatric expertise in the Washington region. Children’s National guarantees a fellowship-trained pediatric anesthesiologist will be on your child’s case, and available 24 hours a day/seven days a week, providing the safest environment for your child. Our physicians, highly skilled nurses, and many other pediatric healthcare professionals deliver the highest quality and most technically advanced surgical care to you and your child, all in a family-centered environment.

This booklet helps you prepare for your child’s operation. It contains important instructions about what to do and expect before, during, and after surgery. I urge you to read it carefully and keep it with your child’s medical information. If you have other questions and concerns, your child’s physician or nurse will be happy to answer them.

We recognize each child is unique, and deserves a personalized plan of care. We look forward to working closely with you to create such a plan, ensuring the comfort and safety of your child.

Anthony Sandler, MD
Surgeon-in-Chief
Senior Vice President
Joseph E. Robert, Jr., Center for Surgical Care
Children’s National Health System
Scheduling the Surgery

After we receive the referral for surgery, please allow one business week for the surgical scheduling coordinator to contact you to set a date for surgery. If you are not contacted within one week, please call your surgeon’s office.

These steps must be taken before a surgical date can be set:

• If you are not the biological parents or legally adoptive parents, you must provide proof of legal guardianship to the surgical scheduling coordinator before surgery can be scheduled.

• If you are an adult patient age 18 or older who has the ability to make an informed decision, you have the right to make your own medical treatment decisions. Please see page 13 for more information.

• Any consultations or tests requested by your child’s surgeon, such as seeing a neurologist or having a CT scan, need to be completed and the results faxed to your surgeon’s surgical scheduling coordinator.

• Self-pay patients must make arrangements with Children’s Financial Information Center by calling 202-476-5547.

Physical exam

Your surgeon will let you know if you are required to obtain a history and physical exam performed by your child’s primary care physician. If it is required, when the surgery date is set, schedule a pre-surgical physical to be completed approximately 7-14 days before surgery. Any necessary lab work should be done at that time as well.

The day the physical exam is done, your child’s primary care physician should fax the “Outpatient History and Physical” form to your surgeon’s surgical scheduling coordinator. Call the surgical scheduling coordinator to confirm that the form has been received.

Important: You should keep the original form and bring it with you on the day of surgery.

Lab Work

Your child’s surgeon may request certain lab tests be done. Results must be faxed to the surgical scheduling coordinator at least one week before the surgery. Tests may be done by:

• The primary care physician at the time of the pre-operative physical

• The clinical lab at Children’s National Health System (if your insurance allows)

• An insurance-contracted lab

The clinical lab at Children’s National is open:
Monday-Friday, 8 am - 6 pm
Saturday, 10 am - 2 pm
Call 202-476-5355 to schedule an appointment.
**Blood donations and transfusions**

Children’s National offers a Directed Donor Program, which allows family members or friends to donate blood to be used during the patient’s hospital stay and/or for procedures. There is no evidence that blood from directed donors is safer than from regular volunteer donors, but this service is frequently requested by parents.

The Blood Donor Center at Children’s National is open: Monday-Friday, 7 am - 4:00 pm
Call 202-476-KIDS to schedule an appointment.

Some patients may donate blood for themselves for elective surgeries through the Autologous Donation Program. Donation must be done at least one week before surgery. The child must be healthy, cooperative, not be anemic, and at least 10 years old. Small children can’t be their own donors.

For more information about both kinds of blood donation, ask your physician and/or visit [ChildrensNational.org/DonateBlood](http://www.ChildrensNational.org/DonateBlood).

**Religious Considerations**

Some families hold religious beliefs which prevent their acceptance of whole blood and, sometimes, other blood products. Children’s National is committed to the care of all its patients, regardless of their religious beliefs. If you have a religious objection to the use of blood transfusions for your child, please discuss this with your surgeon well in advance of surgery.

**Language Services**

Children’s National is committed to assisting with communication between patients and families who may be deaf, hard of hearing, or who may not speak English as their first language. Interpreters are available for patients and families at no cost, 7 days a week, 24 hours a day, for as long as the patient or family needs assistance.

If you and/or your child will need such help during the child’s surgery, call 202-476-5444, Monday-Friday, 8 am - 11:30 pm.

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**Preparing Your Child for Surgery**

**Talking to your child**

Children’s National Health System understands that you may be unsure about what to tell your child about surgery. Below are some age-appropriate guidelines from our certified Child Life Specialists to help prepare both you and your child:

**Infants (0 to 12 months old)**

Be prepared. If you are prepared, you will be more relaxed around your child. Your baby will sense if you are frightened or stressed. Familiar objects and people are important to infants. Bring your child’s favorite blanket, toy, or pacifier to the hospital.

It is normal for infants to be fussy. Plan to distract, rock, walk, and comfort your baby during this time. After surgery, infants are more likely to drink from a familiar bottle nipple or sippy cup, so it can be helpful to bring an empty bottle or cup for use after surgery. Also remember, it is important to try to keep routines as normal as possible.

**Toddlers (1 to 3 years old)**

Begin preparing your toddler a day before surgery. Use simple words a small child would understand. Read books about going to the hospital. Engage your child in play with a toy medical kit to help with expression of feelings and to familiarize them with medical equipment they may see on the day of surgery.
Toddlers are learning to be independent and like to make choices. Offer only realistic choices: Which stuffed animal would you like to take with you? Which T-shirt would you like to wear to the hospital? Be patient with your toddler. It is normal for your toddler to be fussy. Provide a lot of comfort and let your toddler know that you will be nearby.

During exams at the hospital, explain what the doctors or nurses will do, before they touch your child. Toddlers learn by watching, so you may let the nurse listen to your heart or take your temperature first. This helps make the surgery exam as non-threatening as possible.

**Preschoolers (3 to 5 years old)**

Prepare your preschooler one to three days in advance. Talk to your child about the hospital. Explain that the hospital is a safe place, where many kids come to see doctors. Be honest, giving simple explanations and answers to your child’s questions without too many details. If appropriate, help your child understand that he or she did not do anything to cause the surgery, procedure, or hospitalization. Be careful not to force a discussion about the upcoming event if your child does not seem ready. Here are some suggestions for language to use with your child:

- Stretcher: “Bed with wheels”
- Blood pressure cuff: “Arm hug”
- Anesthesia: “Sleepy medicine”
- IV: “A tiny straw that helps give your body medicine and water”
- Operating room: “Where doctors help you while you sleep”
- Recovery room: “Wake up room”

Play is how children learn, so playing hospital or doctor is very beneficial. You can use a toy doctor kit and stuffed animal to act out measuring temperature and blood pressure, listening to your heart and lungs with a stethoscope, and drinking medication. This will help your child become more familiar with medical equipment and provide an excellent opportunity to express his or her feelings about the upcoming medical event. Your child may enjoy reading books about the hospital with the family before their visit.

**Elementary School-Age Children (5 to 12 years old)**

Prepare your child about 1 to 2 weeks ahead of the visit. Help your child understand why he or she needs to have the procedure, surgery, or hospitalization.

For younger school-age children, emphasize that your child has not done anything wrong and that surgery is not a punishment. Allow your child the opportunity to ask questions and express concerns. Let your child know that it is acceptable to be afraid and to cry. Give your school-age child more detail about what he or she will hear, see, smell, and feel while in the hospital. Be very honest. The true facts may be less frightening than your child’s exaggerated imagination of what might happen. Ask your child open-ended questions such as, “What are you wondering about your surgery?” Fear of body mutilation is common at this age, so let your child know if a body part will look different after surgery. Prepare your child for seeing stitches or bandages.

**Adolescents (12 to 18 years old)**

Adolescents are learning independence and decision-making. They are concerned with body image, loss of control, privacy, and relationships with friends. Talk about what is going to happen and give as much detail as the adolescent may need. Encourage adolescent participation in discussions with the doctor or nurse. Take the time to help your adolescent write down questions they may have. Remember, all questions are important. Be honest. Respect your adolescent’s need for privacy.

**What to tell siblings**

Siblings in the family may have questions, too. Use simple, honest language that they can understand to talk about the coming surgery. Let your children know that all of their feelings are okay and it is important to talk about them. As much as possible, allow siblings to be involved in their brother or sister’s care at home. Siblings feel included when they are assigned tasks that are helpful to the family. Try to keep family routines as normal as possible.

**Additional support**

Children’s National has certified Child Life Specialists available if you or your child needs additional support. Child Life Specialists are healthcare professionals who work with children in the hospital to help them understand and cope with illness, treatment, and hospitalization. Surgical Child Life Specialists are available to provide consultations, assistance with preparing your child for surgery, and in-person support on the day of surgery. Contact the surgical Child Life Specialist at 202-476-5665.
The Pre-Operative Care Clinic

The Pre-Operative Care Clinic (POCC) is a dedicated team of healthcare professionals who specialize in preparing patients for surgery. POCC evaluates patients on an individual basis to design a specific care plan for each child having surgery.

You will receive a call 3 to 5 days prior to surgery to discuss your child’s health, your concerns, and to answer any questions you might have. It is important that we know your child’s health history to help identify potential risks before your child’s anesthesia and surgery. We need to know:

- All prescription and non-prescription medicines your child is taking. If your child takes medication every day, you will be told which medicine should be given before surgery.
- If your child has a history of heart or lung problems, your child’s cardiologist or pulmonologist may be asked to give medical recommendations and clearance before surgery and anesthesia.
- There are other issues which may or may not apply to your child. It’s a good idea to think about these ahead of time so you are prepared for the pre-operative interview. Does your child have:
  - Allergies to medicine, food or latex
  - Reactions to anesthesia or to a blood transfusion
  - A history of motion sickness or nausea after anesthesia or medication
  - Updated immunizations
  - Previous illnesses or operations
  - Previous hospital stays (admissions), tests, or treatments
  - Autism spectrum disorder, developmental delays, or other special needs
  - Anything that might put my child at risk during the hospital visit

Pre-Surgical Tour

We encourage families to visit the hospital for a pre-surgical tour so children and caregivers can familiarize themselves with the process. The tours, which take place every Sunday at 2 pm, end with refreshments and a question-and-answer period. Pre-registration is required.

On the tour you and your child will:

- Tour the Surgery Preparation and Recovery Center
- Learn what to expect on the day of surgery
- Learn simple facts about anesthesia

TOURS:
Sundays at 2 pm

LENGTH:
1.5 hours

WHERE:
Sign in at Information Desk in the hospital Atrium.

REGISTER:
Pre-registration is required. To register for an upcoming tour, please call 202-476-3812 or visit ChildrensNational.org and look under “Specialty Care Patients: Preparing for your Visit.”

There is also an online pre-surgical tour video in language that is easy for children to understand. The video can be viewed in English or Spanish. Visit ChildrensNational.org and look under “For Patients and Families.”

Children's National Health System
Sheikh Zayed Campus for Advanced Medicine
111 Michigan Ave NW
Washington, DC

MORE INFORMATION:
Call 202-476-3812
Two business days before surgery
A surgical preparation nurse will call you before surgery between 3 pm and 9:30 pm to provide you with the time of arrival. If you do not receive this phone call, or are away from your phone, please call 202-476-3370 by 10 am the business day before surgery.

POCC offers visits for families of patients with complex medical needs who want to meet with the anesthesiologist before the surgery date.

Anesthesia: What to Expect
Children’s National would like to prepare you and your child for your child’s upcoming anesthesia. We want to make the perioperative experience as pleasant as possible, and to assure you that your child’s safety is always our number one concern. Children’s National guarantees anesthesia administered by a fellowship-trained pediatric anesthesiologist, providing specialized care for your child. If your child is having surgery for a cardiac condition, Children’s National has a dedicated cardiac anesthesia team who will care for your child.

At the discretion of the anesthesiologist, you may be allowed to be present when your child begins receiving anesthesia. This is generally for patients over one year of age and less than 13 years of age, who cannot be adequately sedated in the preoperative area and who are undergoing non-emergent procedures. Additionally, a Child Life Specialist, nurse, or doctor must be available to escort you from the operating room (OR) to the waiting room in order for you to be present in the operating room.

For children less than one year of age, the safest place to start anesthesia is in the operating room. Your anesthesiologist will gently take your child, go directly to the operating room, place monitors, and help your child breathe into an anesthetic mask. Young children will quickly fall asleep with this technique, usually in less than a minute.

For children over 1 year of age, scheduled for elective surgery, in good health, and weighing less than 100 pounds, anesthesia will begin in one of two well-accepted ways:

• Option 1: Your child will drink a raspberry-flavored sedative called Midazolam. You may also hear your child’s surgical team call this medicine Versed. Within 10 minutes your child will become “relaxed.” At this time the child will be brought straight to the operating room and begin general anesthesia. Midazolam blurs the memory so your child probably will not recall leaving you or entering the operating room.
Day of Surgery: What to Expect

We know surgery can be a stressful experience for your family, and Children’s National Health System is dedicated to making this a safe and smooth process for you. Our Center for Surgical Care is designed with a focus on family-centered care and allows your child to go through all the steps to prepare for surgery in one location. The Center has private and semi-private surgery preparation and recovery bays, as well as playrooms. The recovery center is spacious and each bay provides two adults and a patient with comfort and privacy.

When should I be there?
A surgical preparation nurse will call you two business days before the surgery telling you when you should be there. If you do not receive this call, or are away from your phone, please call 202-476-3370 by 10 am the business day prior to surgery. In general, please plan to report to the Center for Surgical Care at the stated arrival time provided by the nurses.

When I arrive at Children’s, where do I go?
Parking: For the convenience of our surgical patients and families, Children’s National offers an underground parking garage. The garage is open 24 hours a day. Look for brightly colored signs that direct you into the garage. Visitors can pay the parking fee inside the hospital at various automated stations. The hospital parking garage is a busy location, please plan extra time for arrival and parking.

Discount parking vouchers: These are recommended for families who plan to park for three hours or more. The pass can be purchased from the Parking Office by the Emergency Department entrance. Each voucher lasts up to 24 hours (or one exit). There are no in-and-out privileges on the same ticket. Since the offices are closed during the weekend, parking will be automatically discounted.

Valet Parking: Children’s offers valet parking at no additional cost for patient families and visitors in the parking garage between 7 am – 5 pm, Monday – Friday. Normal parking rates apply.

For more information about transportation, contact Concierge Services at 202-476-2220, visit the Welcome Desk in the Main Atrium, or call the Welcome Desk at 202-476-3000.

• Option 2: If your child does not receive Midazolam, they will use a mask to breathe anesthesia gasses and if needed, an IV will be placed after your child is asleep. Good scents, like bubble gum or strawberry, can be added to the mask to make it more enjoyable for your child to breathe through. In limited situations and at the discretion of the anesthesiologist, one parent may be present when your child falls asleep.

If you are with your child as they fall asleep, you may notice the following signs as the anesthesia takes effect: faster breathing, moving their body around, or eyes rolling back. These are normal reactions to anesthesia and your child will be unaware of their surroundings or their actions during this time.

For older or cooperative children, an intravenous catheter (IV) may be the best choice. A numbing patch will be placed on your child’s skin so he or she will have little to no pain when the needle is inserted. Once the IV is in place, “sleepy” medicine will be given.

Children with special medical needs, such as heart, breathing, blood, or brain problems, may need different starting methods, which will be explained to you by your anesthesiologist.

If your child has autism spectrum disorder, developmental delays, or other special needs, additional support can be provided for the surgical process by the surgical Child Life Specialist. The Child Life Specialist can be a liaison between you and the surgical team to help you and your child navigate the surgical process with as little stress or upset as possible.

For female patients who are of menstruating age, a urine pregnancy test will be given prior to receiving anesthesia.

If you have any additional concerns, you may call our POCC office at 202-476-7622 and ask to speak to a nurse, or call our Anesthesiology office at 202-476-2025 and ask to speak with an anesthesiologist. On the day of surgery, you will meet your anesthesiologist and discuss the best way for your child to go to sleep.

Children’s National guarantees anesthesia administered by a fellowship-trained pediatric anesthesiologist, providing specialized care for your child.
Personalized driving directions from your home are available at www.childrensnational.org/Locations

Once you’ve parked, go up to the first floor to check in at the hospital.

Please bring a photo I.D. to receive a visitor’s badge. Patients age 18 or older must have a photo I.D. All visitors are required to sign in at the Welcome Desk. From there, take the elevators to the second floor, and follow the signs to Surgery.

What do I do when I get to the Center for Surgical Care?

When you arrive, the first thing you do is check in. After that, you will be directed to registration.

After registration, you and your child will be brought to the Surgical Preparation area. Here, they will discuss the details of the surgery plan and answer your questions. If you have not done so in advance, you or the adult patient will sign the consent form after speaking your anesthesiologist and surgeon.

Cardiac patients only: You will be given a pager that will provide text messages during your child’s procedure and buzz when your child’s doctor has an update for you or when it is time for you to be reunited with your child. The pager works inside the hospital, and gives you the flexibility to walk around until surgery is completed.

You might be brought to the playroom where your child will be able to play with toys, puzzles, and games while waiting for the surgery to start.

To help reduce the risk of infection after surgery, please wash or sanitize your hands before and after visiting a patient, using the bathroom, and after you sneeze or cough. You are welcome to use any sink or waterless hand gel dispenser to clean hands at any time.

What happens when it is time for surgery?

Once care has been assumed by the anesthesiologist, you will go back to the waiting room while your child goes to the operating room (OR). In the OR, the anesthesiologist will provide anesthesia and continuously monitor your child. Medications will be given during surgery to help your child wake up with minimal discomfort. Once your child’s surgery is complete, the surgeon will discuss the operation with you.

Why does my child have an intravenous catheter (IV)?

In most surgeries cases, your child will receive an intravenous catheter (IV). The IV is very important! The anesthesiologist will use it throughout the surgery and the recovery nurse will use it while your child is in the recovery center. The IV allows your child to receive hydration and various medications, including pain...
Where can I get food and refreshments while my child is in surgery?
• The cafeteria is located on the second floor of the hospital.
• Dr. Bear’s Cafe is located on the seventh floor of the East Inpatient Tower.
• Walgreen’s is located on the first floor of the hospital and has snacks and drinks.
• The Coffee Bar is located on the first floor near Admissions, and drinks and snacks are available for purchase.

Signs are posted in the building to help you find your way. Please remember that no food is allowed in the Family Waiting Room or the surgical preparation area out of respect for children who are having surgery, and are not allowed to eat or drink. There are children fasting for surgery and the smell and sight of food can make it more difficult for them.

After Surgery: What to Expect

How will I know when my child’s surgery is complete?
When your child’s surgery is complete, the surgeon will find and update you on the surgery and answer any questions you may have.

When will I be reunited with my child?
Your child will be observed for a period of time in the Recovery Center. The nursing staff will reunite you with your child as soon as safely possible. While in the Recovery Center, the nursing staff will monitor your child’s vital signs, pain control, and responsiveness (waking-up). The Recovery Center staff do their best to have parents and caregivers by their child’s side before the child wakes up, but this is not always possible. The length of stay in the Recovery Center varies; however, you should expect your child to stay at least one hour. You can remain with your child in the recovery room, until he or she is ready to go home or transferred to the inpatient unit.

What will my child be like after surgery?
Children respond differently to anesthesia. Some children wake up quickly and may be awake before their families arrive at the bedside. Other children may still be sleeping from the effects of anesthesia. Please do not wake your child; children often have a gentler and more comfortable wake up when they awaken on their own.

Some children may have an upset stomach; often children are given medications to help decrease the possibility of nausea and vomiting. Some children may have dizziness,
or a sore throat due to the use of a breathing tube during surgery. Some children wake up shivering though they are not cold. Encouraging your child to take deep breaths will help. All of these reactions are normal. Some children wake up restless or irritable, in a condition known as “emergence delirium.” Some appear awake but are not aware of what is going on around them. Some cry, thrash, arch their back, reach out and seem inconsolable, even when they are in their parent’s arms. This behavior is commonly seen and not usually related to pain, and children do not usually remember it. Emergence delirium may be upsetting for you to see, but be assured that it will go away. By staying calm, speaking softly, and remaining at the bedside, you can be a comfort to your child. Your nurse will be at the bedside to reassure and support you in consoling and comforting your child. As a result of the surgery and the anesthetic, you may see changes in your child’s sleep and behavioral patterns. If changes occur, it may take several days for your child to return to normal. If concerns persist, please contact your surgeon or anesthesiologist. The surgical Child Life Specialist may also be available to provide distraction and non-pharmacological pain management techniques. Please ask your nurse to contact the Child Life Specialist.

**Will my child have to stay in the hospital after surgery?**

The majority of surgeries at Children’s National are performed on an outpatient basis, meaning children will go home on the same day. Your child’s surgical team will assess your child’s recovery and discuss the best option with you. If your child is admitted to the hospital to stay overnight in the Recovery Center for extended observation, one parent or caregiver is required to stay overnight with their child. We encourage you to bring quiet activities for your child. There is a playroom in the Recovery Center that you and your child may use with permission from your child’s recovery nurse. While in the Recovery Center, the staff will make your stay as comfortable as possible.

**Leaving the Hospital and Follow-Up**

**When will my child be able to go home?**

Your child’s surgical team will continually monitor your child’s recovery and communicate with you throughout the process. Your child’s care team will determine the best and safest time for your child to go home.

**What are the criteria for going home?**

Your child should be awake and alert, tolerating clear liquids, and his or her pain should be under control before going home.

**What is the going home process?**

The nurse will review all the discharge instructions for your child’s care at home, which will include: surgery site care (as applicable), diet, activity, medications, follow-up appointments, call center appointment line number, possible post-operative complications, and phone numbers to call if you have a problem or question. When it is time to go home, you may assist your child in changing into his or her clothes while in the Recovery Center. Your child will not be allowed to walk out of the Recovery Center. Your child can use a hospital wheelchair or stroller to exit, or you may carry your child. Please make arrangements in advance for transportation home. Follow-up appointments may be made at many of our Regional Outpatient Centers, located in Maryland and Virginia. Visit ChildrensNational.org/Locations to find the location nearest you.
What can I expect when we get home?
You or a responsible adult must supervise your child closely on the day of surgery. Your child may be drowsy and may nap or sleep on and off the rest of the day.
A nurse will call you one to two days after your child’s surgery to follow up on your child’s progress and to answer any questions you may have.

What if I have questions?
If you have questions or concerns, you may call the Recovery Center Monday through Friday, at any time, and Saturday and Sunday, 7 am - 7:30 pm, at 202-476-5122. An anesthesiologist can be reached 24 hours a day, 7 days a week, by calling 202-476-5000.

We recommend that you or another responsible adult supervise your child closely on the day of surgery.

Insurance and Referrals
Please have the following information on hand
• Name and telephone number of the child’s insurance company
• Policy holder’s name, social security number, place of employment, and work phone number
• Policy and group numbers
• Name, address, and phone number of your child’s referring physician

Know what your insurance company requires
Most insurance companies require you to take certain steps before they will cover the cost of a surgical procedure for your child. Every parent should contact their insurance company to ask the following questions:
• Does the insurance company require a referral from the primary care physician?
• Does the insurance company require a second opinion?
• Does my insurance plan have a deductible?
• Does my insurance plan require a co-pay?
• Is there a pre-existing clause in my insurance plan?

Does the insurance company require a second opinion?
If the insurance company requires a second opinion, it is the parent and/or guardian’s responsibility to obtain one. Your primary care physician can suggest doctors to call.

What if my child isn’t covered by insurance?
If you do not have health insurance, our financial counselors can help you determine if you are eligible to apply for Medical Assistance (Medicaid) and will help you through the process. We also can help you apply for our charity or financial assistance programs. Based on the first letter of your last name, the counselors can be reached at:
• A-K: 202-476-3326
• L-Z: 202-476-5505

Extended payment arrangements may be considered on an individual basis during your consultation. Please contact a customer service representative Monday through Friday, 9 am to 4 pm, at 301-572-3542. You also can visit the Financial Information Center located in Room 1820 on the first floor of the main hospital.

Patients and parents/guardians have the responsibility:
• To provide, to the best of their knowledge, accurate and complete information about all matters relating to the child’s health
• To the extent allowed by law, to both formulate advance directives and expect hospital staff and practitioners who provide care will comply with these directives
• To be considerate of other patients and staff and to encourage the patient’s visitors to be considerate as well
• To pay for services provided, and/or provide necessary information to process insurance claims related to your child’s hospital and outpatient service bills
• To follow the treatment plan recommended by the practitioner and agreed upon for the patient’s care

Informed consent and advance directives
If you are an adult patient age 18 or older who has the ability to make an informed decision, you have the right to make your own medical treatment decisions. You also have the right to draft an advance directive giving instructions for health care when you are no longer able to participate in treatment decisions. For copies of advance directives prior to your surgery call your doctor.
A note to parents of adult children
At age 18, children become legally responsible for providing consent for all medical treatments. However, if you or your doctor feel that your child is not able to understand the risks and benefits of medical treatment and cannot make an informed medical decision, a legal guardian must be appointed prior to surgery for that purpose. To obtain legal guardianship over an adult child, parents must apply to probate court in the county where the child lives. For more information, please contact a lawyer or the probate court.

Information about consenting parent/party
This information is provided to clarify who may sign paperwork and consent to evaluation and treatment for a child at Children’s National. If you have any questions about this information, please contact your provider.

• Biological Parent: The biological parents are the child’s natural mother and father, i.e., the woman who gave birth to the child, and the man who fathered the pregnancy. Biological parents may sign all paperwork on the child’s behalf and may consent to evaluation and treatment unless a court has determined that the parent no longer has this right. By signing any paperwork at Children’s National, the biological parent certifies that there has been no court action which would prevent them from doing so.

• Adoptive Parent: The adoptive parent is the parent who has been granted adoption of the child by court order. A copy of the court’s approval of the adoption must be provided to Children’s National in order for the adoptive parent to sign paperwork or consent to evaluation and treatment for the child.

• Foster Parent: The foster parent may or may not be able to sign paperwork for the child, depending on which state and county in which the child lives. If you are the child’s foster parent, please contact the child’s social worker to clarify what you are permitted to sign for and to request documentation from the social worker indicating this. You will be required to present paperwork from the county establishing your ability to consent prior to the child being seen or treatment being given. Please also give the social worker’s name and phone number to the child’s provider so that we may contact the social worker directly if questions arise.

• Caregiver or Other Family Member: The caregiver or other family member may not sign any paperwork on the child’s behalf, nor may they consent to evaluation or treatment unless they provide written authorization to do so signed by one of the biological parents. A copy of this authorization is enclosed for your use. This authorization will expire 60 days from the date the parent signs it.

• Parent Requesting Accommodation of a Divorce Decree: In an instance when the divorce decree changes either parent’s rights to consent to a child’s treatment, Children’s National needs to have a copy of that court decree. The court order may be brought the day of the surgery.

It is important that you bring any required paperwork referenced above to the child’s first appointment at Children’s National to avoid the need to cancel appointments or procedures.

If you are an adult patient age 18 or older who has the ability to make an informed decision, you have the right to make your own medical treatment decisions.
<table>
<thead>
<tr>
<th>Department</th>
<th>Number/Extension</th>
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<tbody>
<tr>
<td>Anesthesia and Pain Medicine</td>
<td>202-476-2025</td>
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<tr>
<td>Blood Donor Center</td>
<td>202-476-5437</td>
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<tr>
<td>Child Life Specialist</td>
<td>202-476-5665</td>
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<tr>
<td>Consumer Affairs/ Ombudsman</td>
<td>202-476-2885/2625</td>
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<tr>
<td>Family Library</td>
<td>202-476-4055</td>
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<tr>
<td>Financial Information Center</td>
<td>202-476-5022</td>
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<tr>
<td>Hospital Operator</td>
<td>202-476-5000</td>
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<tr>
<td>Laboratory</td>
<td>202-476-2226/5915</td>
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<tr>
<td>Language Services/Interpreters</td>
<td>202-476-5444</td>
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<tr>
<td>Pastoral Care/Chaplain</td>
<td>202-476-3321</td>
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<tr>
<td>Patient Experience Liaison</td>
<td>202-476-6160</td>
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<td>Pre-Operative Care Clinic</td>
<td>202-476-7622</td>
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<tr>
<td>Pre-Surgical Tour</td>
<td>202-476-3812</td>
</tr>
<tr>
<td>Recovery Center/Wake-up Room</td>
<td>202-476-2031/5122</td>
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<tr>
<td>Surgical Preparation</td>
<td>202-476-3327/3370</td>
</tr>
<tr>
<td>Surgery Registration/Family Waiting Room</td>
<td>202-476-3456</td>
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Please ask a staff member if you need to reach another department, or call the main hospital operator at 202-476-5000.