

The background of the slide features a close-up, shallow depth-of-field photograph of several clear plastic medical tubes, likely for an IV, with some blue and green markings. To the right, there is a bright orange seahorse sticker with black spots. On the left side, there are several small, semi-transparent blue circles of varying sizes, resembling bubbles or water droplets. The overall color palette is light blue and white, with a soft, clinical feel.

**What to Expect  
When You Get an IV  
at Seattle Children's Hospital**

## **A note for parents/caregivers:**

This book is for children of all ages and follows a common patient experience about getting an IV. Because patients have different reasons for visiting the hospital and may have other health conditions, some sections may not apply to your child.

Some children can cope with a lot of information and others become anxious when given too much. Choose which sections to share with your child. You know your child best. Remember, honesty is important to build trust.

Because getting an IV involves a needle, it is important to talk with your child about pain management. This book will help you and your child talk about coping strategies.

Before the procedure, talk to your child's care provider about using numbing medicine for the skin where the needle will be placed. For more information, read our handout "Numbing Cream for Painful Procedures" at [www.seattlechildrens.org/pdf/PE1167.pdf](http://www.seattlechildrens.org/pdf/PE1167.pdf).

## **What you can do**

We encourage you to be present and supportive of your child when they are getting an IV. You can:

- Distract them by talking to them about something other than the IV.
- Hold your child's hand or have them sit on your lap.
- Comment on their successes. For example, praise your child for holding their arm still. This can build their confidence.
- Acknowledge how your child is feeling. Saying things like "It's OK" or "I'm so sorry" are often less helpful when providing support to your child.

If you will be coming from home, encourage your child to drink a lot of water the night before the IV (only if your doctors says it's OK). Being hydrated makes it easier to see the veins that carry blood through the body. Also, dress your child warmly. When the body is warm, the veins are easier to find. Have your child wear a shirt with sleeves that can be pushed up or rolled out of the way.

For questions or to schedule a Child Life consult, which includes medical play, coping strategies and/or a tour, contact:

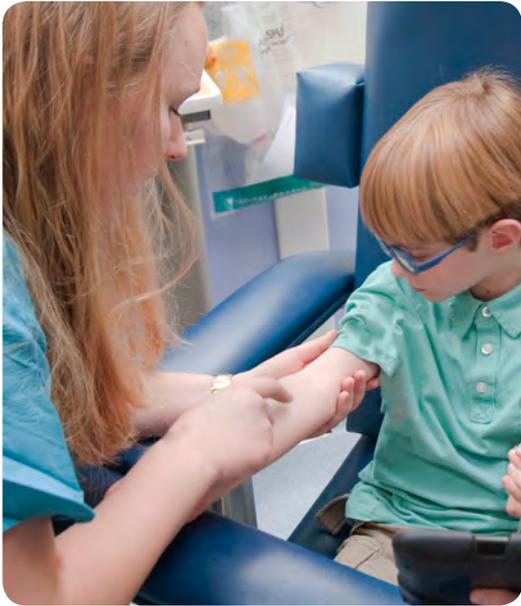
**Seattle Children's Child Life Specialists**  
206-987-2145

Lots of kids get IVs in the hospital. This book will help you know what to expect when you get your IV.

IV stands for “intravenous.” An IV is a tiny, soft tube or straw that a nurse puts into your vein to give your body liquids, medicine and the nutrients (food) it needs while you are in the hospital. An IV may also be used to take a little blood out of your body for testing.



Have you ever had an IV before?



When it's time to get your IV, the nurse will ask your name and birthday and check your ID band.

The nurse will take a close look at your veins to find the best spot to place your IV.

The nurse may put a heat pack on your arm or hand to warm your body and see your veins.

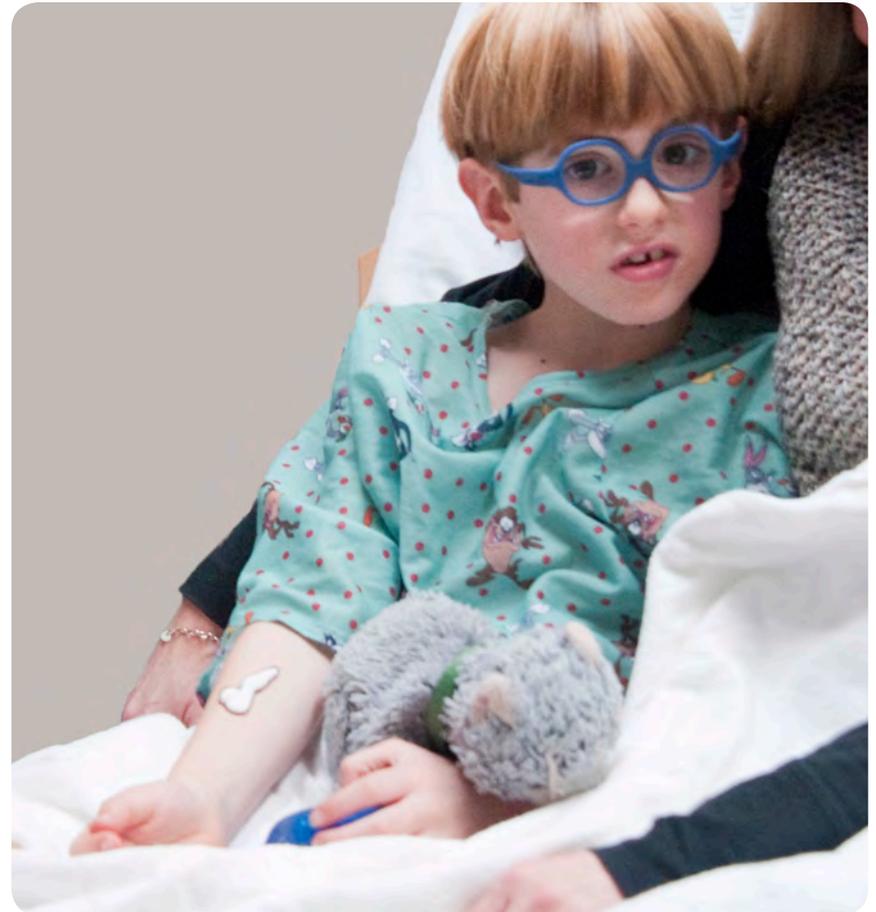


Veins are the blue lines you see under your skin. They carry blood to all parts of your body.

The nurse will use a small needle for the IV. This needle helps the IV enter your vein.

Before you get an IV, you can get medicine to help numb your skin.

Ask your nurse, “What kind of numbing medicine will I get?” You may get numbing cream or a spray called a J-Tip.



When something is numb, it means you don't feel it as much. Have you ever had numbing medicine before?



### Numbing cream:

- Looks and feels like white lotion.
- Takes about 30 minutes to work.
- Gets covered with plastic wrap so it stays in the right spot.



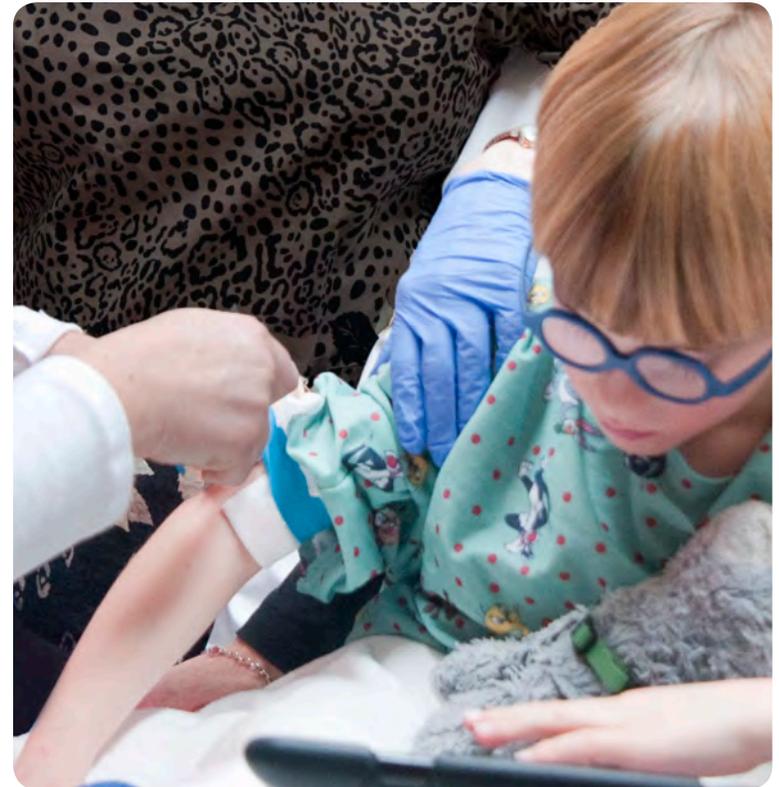
### A J-Tip:

- Is sprayed onto your skin and works right away.
- Makes a loud sound like a pop can opening.
- Is **not** a needle — ask the nurse to show you first.

Next, the nurse will clean your skin. If you used numbing cream, the nurse will wipe it off. The cream has already done its job to numb your skin.

The nurse will tie a colored rubber band called a tourniquet (“TURN-a-kit”) around your arm. It will feel like a tight squeeze. You can ask your nurse to put a paper towel or cloth under the band if it feels too tight.

The tourniquet is important because it makes it easier to see your veins.



Look at your arm. How many veins can you see?



Now the nurse will place your IV. The IV needs the help of a little needle to get in the right spot in your vein.

Your job is to hold your arm still and take calm, deep breaths.

You might feel a pinch or pressure as the IV goes into your arm.



After the needle does its job, the needle comes out. The only thing that's left in your body is the tiny IV.

After the needle comes out, the nurse will check to make sure your IV is working by flushing it.

Flushing an IV means pushing water into it to make sure it's working. A syringe is used to push the water into the IV. Here's what a syringe might look like.

The nurse will put tape over your IV to keep it in place.





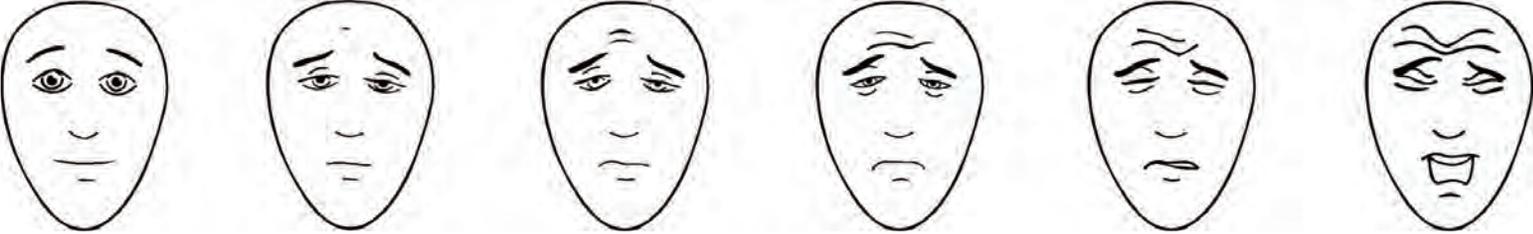
You may also get an armboard and netting to help protect your IV.



You're all done! Do you have any questions? Ask!

After your IV is placed, you may be asked if you felt any pain.  
Here are two possible ways to answer:

Point to the face that best matches how it felt.



The image shows a horizontal row of six faces, each with a different expression of pain. From left to right: 1. A neutral face with a slight smile. 2. A face with a slight frown and furrowed brows. 3. A face with a more pronounced frown and deeper furrows. 4. A face with a very deep frown and heavy, closed eyes. 5. A face with a grimace, showing teeth, and a wide-open mouth. 6. A face with a very wide, open-mouthed grimace, showing teeth, and a wide-open mouth.

Or use numbers to say how it felt —  
0 means it did not hurt and 10 means it hurt a lot.



0 1 2 3 4 5 6 7 8 9 10

no pain worst pain

The image shows a horizontal number scale from 0 to 10. The numbers are placed below the scale line. Below the number 0 is the text 'no pain'. Below the number 10 is the text 'worst pain'.



Now that you know what to expect when you get your IV, think about what you can do to stay relaxed, calm and still during the procedure.

### Do you like to watch and learn?

You can:

- Ask to hear about each step before it happens, or as it happens.
- Ask the nurse what you can do to help.
- Take slow, deep breaths.
- Have someone hold your other hand.

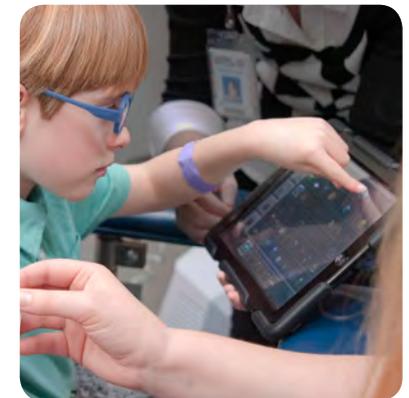


## Do you like to look away?

You can:

- Ask the nurse to cover the IV supplies.
- Bring a toy or book from home to look at, or ask for one at the hospital.
- Look at something else in the room or close your eyes.
- Take slow, deep breaths to help your body relax.
- Have someone hold your other hand.

Remember: Your most important job is to hold very still and take calm, deep breaths.





# My IV Plan

You can use this plan to prepare for getting your IV. Fill it out and bring it with you to your IV procedure.

**My name:** \_\_\_\_\_

**While I wait for my IV, I will:**

- Read a favorite book
- Hug my stuffed animal
- Watch a movie
- \_\_\_\_\_

**I want to use numbing medicine:**

- Yes
- No

**I want to sit:**

- By myself.
- On \_\_\_\_\_'s lap.

**I want to:**

- Watch
- Look away

**Things that will help me during my IV:**

- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_

## Free Interpreter Services

- In the hospital, ask your child's nurse.
- From outside the hospital, call the toll-free Family Interpreting Line, 1-866-583-1527. Tell the interpreter the name or extension you need.



4800 Sand Point Way NE  
PO Box 5371  
Seattle, WA 98145-5005

206-987-2000 (Voice)  
1-866-987-2000  
(Toll-free for business use only)  
1-866-583-1527 (Family Interpreting Line)

[www.seattlechildrens.org](http://www.seattlechildrens.org)

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Page 11: Faces Pain Scale – Revised (FPS-R) (2001) Hicks CL, et al. References available upon request.

Seattle Children's offers interpreter services for Deaf, hard of hearing or non-English speaking patients, family members and legal representatives free of charge. Seattle Children's will make this information available in alternate formats upon request. Call the Family Resource Center at 206-987-2201.

This handbook has been reviewed by clinical staff at Seattle Children's. However, your child's needs are unique. Before you act or rely upon this information, please talk with your child's healthcare provider.

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