Here are some things you and your child will see and do in a day at the hospital.

**Your child’s room**
We do everything we can to give you a private, quiet space. An adult family member can spend the night in the sleeper chair at your child’s bedside. The chair will push back to let you lie down at night, but it needs to be up in chair position during the day.

The bathroom and shower in the room are for the patients only. Families and visitors may use the public bathrooms on the floor. Adults who spend the night with the child can use the family shower in the treatment room.

**Clean body and mouth**
Every day in the hospital, your child needs a shower, bath, or sponge bath. If you need help, or need soap, a towel, or wash cloth, ask your child’s nurse. If your child has a central line, you or the nurse can do the dressing change after the bath if it is needed.

Your child needs mouth care after every meal and before bedtime.
**Food and drinks**
Your child will get meals in the hospital, and can order from room service. If your child wants a snack or drink, you may get them from the nutrition room. Ask your nurse to show you where this is.

Parents, family, and visitors can buy meals, snacks, and drinks in the cafeteria on the first floor of the hospital.

**Activities**
Children do best when they know what will happen every day. Your child may have medicine, tests, and procedures. Your child will also have times for school in the hospital, play with Child Life, have physical therapy or occupational therapy.

**Weight**
Every morning your child will be weighed. Doctors use your child’s weight to decide how much medicine to give. Your child’s weight also shows if your child is eating enough.

**Intake and Output**
Intake and output, or I & O, is a count of how much food and drink your child takes in, and how much urine and stool comes out. This is one way to measure the health of your child.

The nurse or PCT (patient care technician) may ask you what your child ate or drank. They may ask you to save your child’s diapers, urine, or stool, and show you how.

**Vital Signs**
Vital signs are other ways we measure the health of your child. Vital signs are measures of: temperature, heart rate (also called pulse), breathing rate (also called respirations), blood pressure, and pain. We can also measure how much oxygen is in your child’s blood with a red-lighted probe wrapped on your child’s finger or toe (called an oximeter).
These may be measured as often as every 15 minutes or as far apart as every 6 hours. How often these are measured depends on your child’s tests, medicines, procedures, and how sick your child is at the time.

**Lab tests**
We can measure your child’s health and response to treatments by testing your child’s blood, urine, and stool. If your child has a central line, we will take blood from it, except for some times when blood needs to be taken from a vein. When we need to collect urine or stool for a lab test, the nurse will show you how to do this, or will help you do it.

**Tests, exams, and procedures**
When in the hospital, your child may have tests, exams, or procedures. Some need to be done on an empty stomach. Your nurse will tell you if your child needs to stop eating or drinking before the test or procedure is done. Sometimes, children get medicine to help them relax during the test or procedure. Your nurse will let you know when you can feed your child again, after the test or procedure is done, and your child is fully awake.

**Medicine**
Your child will get medicines at certain times. If you don’t understand what each medicine is for, ask. Some will be given by IV or injection, some by mouth or as eye drops. The nurse needs to watch your child take medicines given by mouth. If your child has an upset stomach, or you think your child cannot take the medicine by mouth, talk to your child’s nurse or doctor.

**Team Rounds**
Each morning the health care team will meet to talk about your child’s health and test results, and plan the care for that day. This meeting is called team rounds. The people on the team include doctors, nurses, pharmacists, and child life specialists.

Before team rounds, a member of the health care team will come in to look at your child. If you have any questions or concerns about your child, tell this team member
or your nurse. Then, they can talk about your concern at rounds, and answer your questions.

**Visitors**
While in the hospital, you and your child may have visitors. Visiting hours are from 8 in the morning to 8 at night.

Children are in the hospital to get better. Any one who may be sick (coughing, sneezing, fever, or runny nose) may not visit. During virus season (RSV), no child under the age of 12 may visit, and your child may not be allowed to leave the floor.

Only 3 visitors may be in your child’s room at one time. If your child has more visitors, they may take turns coming in to see your child. They may wait by the elevators, in the cafeteria, or in the surgical waiting room.

One adult (18 years or older) may stay overnight with your child.

**Now that you’ve read this:**

☐ Tell your nurse or doctor how you can help your child while in the hospital. (Check when done.)

☐ Tell your nurse or doctor how many people may visit your child in the hospital, and when. (Check when done.)

**If you want to read more, ask your nurse or doctor for these handouts:**

☐ How to Avoid Infections If You Are At Risk, #61
☐ The Hematology/Oncology Health Care Team, #738
☐ Respiratory Viruses, #741
Family Review of Handout

Health care providers: Please teach families with this handout.
Families: Please let us know what you think of this handout.

Would you say this handout is hard to read?  ☐ Yes  ☐ No

Please circle the parts of the handout that were hard to understand.

Would you say this handout is interesting to read?  ☐ Yes  ☐ No

Why or why not?

Would you do anything differently after reading this handout?  ☐ Yes  ☐ No

If yes, what?

After reading this handout, do you have any questions about the subject?  ☐ Yes  ☐ No

If yes, what?
Is there anything you don’t like about the drawings? ☐ Yes ☐ No

If yes, what?

What changes would you make in this handout to make it better or easier to understand?

Please return your review of this handout to your nurse or doctor or send it to the address below.

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Thank you for helping us!