

Children's Emergency Department

Procedural Sedation with Ketamine

You have been given this leaflet because we are planning to give your child a medicine called ketamine to help us perform a procedure (tests or treatment). Ketamine is commonly used in hospitals for sedation in children and the following information tells you what to expect.

Why Does My Child Need Ketamine?

Your child needs a procedure which may cause pain or distress. Ketamine is a medicine which is very good at reducing anxiety and pain. It is not an anaesthetic and your child will not be unconscious but the ketamine should make your child feel sleepy and relaxed. This will make it easier to perform the procedure with less distress for your child. Children often report not being able to remember most or all of the procedure afterwards.

How is Ketamine Given?

- Ketamine is usually given intravenously, this means that your child will need a cannula (drip line) inserted into a vein beforehand. Occasionally it may be given as a direct injection into the thigh muscle.
- All procedures requiring ketamine sedation are carried out in our resuscitation area. Your child will be moved to this area when we are ready to perform the procedure.
- Your child will be cared for by a senior doctor and nurse throughout the procedure and the ketamine will be given once the whole team is assembled and ready to go ahead.
- Ketamine is given slowly and the doctor may slowly increase the dose until your child shows signs of sedation.



Patient Information

What May Happen After the Ketamine Has Been Given

- Your child may seem to be awake or 'in a trance' after receiving ketamine; this is normal.
- Your child may move a little without obvious cause; this is normal.
- Your child's eyes may twitch; this is normal.
- Your child may report odd dreams on waking up, and may become a little agitated, (less than 20% of children experience this). This tends to improve if you comfort your child in a quiet area until they are fully awake.
- One in ten children develops a rash.
- One in ten children vomit (be sick).
- One in ten children will have some eye watering, or may drool.
- One in twenty children have some twitching movements.
- Rarely (0.3%) there can be laryngospasm (vocal cords close).
- Very rarely (0.02% of cases) your child may need to be given a general anaesthetic (where your child will be asleep) with a breathing tube placed in their windpipe.
- If any of the above complications occur, the team caring for your child will manage these.
- You will be asked for your consent before we give ketamine and we will talk through the potential side effects with you.

How to help your child

Before the procedure:

- Ask the doctor/ nurse to explain the procedure to you and to your child. You may meet doctors from different teams, one to explain the sedation and one to explain the planned procedure. If you do not understand anything please tell us.
- Talk to your child about some ways to cope (for example, listening to music, watching something on your phone/our iPads, using their imagination to be in a nice place).
- Try to remain calm yourself as children notice when their parents are worried.

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During the procedure:

- We will help to give your child a sense of control with some simple choices. We can allow them to choose things they may like e.g. music and which finger the oxygen probe may be placed on
- It is very helpful to your child for you to be by their side whilst the ketamine is given and starts working however, parents often choose to step out of the room once the ketamine is working and whilst the procedure is being performed. This is understandable. The team will call you back in as soon as the procedure is complete so that you can be with your child as the sedation wears off.
- A parent (or another adult who knows your child) may stay with them.
- Depending on how deeply sedated your child becomes they may need reminders of the coping methods you decided upon earlier. This sort of distraction is very helpful
- It is not helpful to allow your child to decide the exact moment the procedure is going to happen.

Following the procedure:

- Remain with your child and help them to stay calm as the sedation wears off. Children sometimes become agitated at this stage and having a calm, familiar face with them helps a lot. They may temporarily be confused or forget where they are, you can help them with this.
- Focus on the good things your child did and remind them of how brave they have been.
- Most children recover within 90 minutes. Your child will be safe to go home when they are fully awake, can walk without any help, manage to drink without vomiting and whatever injury/illness they came with has been treated appropriately. Once home they should be closely supervised for the first 8 hours and avoid demanding play or sporting activity for 24 hours.

After you go home

Sometimes the delayed effects of the medicines may make your child a bit confused, sleepy or clumsy. You need to be extra careful in caring for and supervising your child for the next 24 hours.

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- Supervise all playing and bathing for the next 8 hours after getting home. **Do not** let your child swim or use play equipment (bikes, monkey bars etc.) that might cause an accident for the **next 24 hours**.
- Sometimes children may feel sick or vomit if they eat a big meal too soon after sedation. Give your child small amounts of clear liquids such as diluted fruit juice, ice lollies, jelly, clear soup etc. and wait two hours before giving them a meal.
- Let your child sleep. Children may go to sleep again after getting home from the hospital. Sometimes children may sleep more because of the sedation medicine; this is normal.
- **If you have any concerns that your child may be experiencing problems relating to the sedation that they have received, please contact the Children's Emergency Department on 024 7696 6934 to discuss the issues with a senior doctor or nurse.**

The Trust has access to interpreting and translation services. If you need this information in another language or format please contact 024 7696 6934 and we will do our best to meet your needs.

The Trust operates a smoke free policy.

To give feedback on this leaflet please email feedback@uhcw.nhs.uk

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