



E 509: Your child's stay in an intensive care unit

Parental Information

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Your child has been admitted to the paediatric intensive care unit (E 509).

This unit works differently than other paediatric wards. In this brochure you will find practical information about our working method.

In case you have any further questions or concerns, please do not hesitate to ask the nurses, the social worker, the intensive care specialist, your GP or your paediatrician. They will make every effort to provide the information and assistance you need.

We will do our best to ensure that your child's stay goes as smoothly as possible, and we wish you and your child all the very best.

The staff at the paediatric intensive care unit – ITE C Unit 509

Tel. +32 16 34 87 70

The unit can be found by following the pink arrow, on the first floor.



TREATMENT WITHIN THE INTENSIVE CARE UNIT

Children are admitted to the intensive care unit either for a planned admission after a major operation, or for an unplanned admission due to a serious complication of surgery, a serious accident or a severe medical condition. In this unit your child's health is closely monitored at all times and every effort is made to give your child the best possible treatment. Sometimes special investigations are also needed.

A monitoring system, also called a 'monitor' is generally used. Often a small tube is placed in an artery to measure the blood pressure continuously and take blood samples without the need for repeated needle use.

Various kinds of devices may be used during treatment. Many children need help with their breathing. This may be for a short time or over a longer period. The assistance is provided by a ventilator, which is connected to a tube that passes through the mouth into the windpipe. As a result your child may be unable to speak or make other sounds. During this stage of treatment some children are also kept in a deep sleep. Devices are sometimes used to take over the functions of the kidneys or heart (temporarily). A wide range of powerful medicines of course also form an important part of the treatment provided. These are given through a small tube in a large vein (usually in the neck or below the collarbone). Strong painkillers and anti-anxiety medicines are given to keep your child more comfortable. It is often necessary to give transfusions of blood products.

As well as the daily review by the doctor and daily blood and urine tests, investigations using technical devices may also be needed, such as X-ray pictures, imaging studies of the lungs, stomach or intestines, and tests on the brain, nervous system and muscles.

How you receive information and give informed consent

These treatments and investigations are necessary to ensure that the best treatment is given, even though they do entail certain risks, some of which are linked to your child's general condition. As far as possible the team treating your child will keep you up to date with how his or her condition is progressing.

As a parent you will be informed in detail beforehand by the attending physician if further surgery, major treatments or special investigations are needed, so that you know what the intervention is for, why it is needed, which risks are involved and what are the possible alternatives. Sometimes, in very urgent situations, it may not be possible to discuss these major interventions with you beforehand. In that case the doctor will act in whatever way he in all conscience considers to be in the patient's very best interests. All the necessary information will of course be provided to you afterwards.

We would also like to make you aware that your child's freedom of movement is slightly restricted when a ventilation tube is in place. Wristbands attached to the edge of the bed are used to prevent your child, who is often still under the influence of the painkillers and anti-anxiety medicines, from reaching out towards the ventilation tube or the other vital wires and devices.

Your child's freedom of movement may also be limited for his own safety if he becomes agitated as a result of being seriously ill or due to the treatments that are needed as a result.

VISITING ARRANGEMENTS FOR PARENTS

In the intensive care unit your child will receive constant medical care from intensive care doctors. These are doctors with special training in intensive medicine. Your child will also receive nursing care 24 hours a day from specialist nurses. Due to the increased levels of supervision and the acute nature of our unit, it is important to make clear arrangements about visiting.

Visiting times

- ★ from 11:00 till 12:00
- ★ from 13:15 till 14:15
- ★ from 16:00 till 17:00
- ★ from 19:00 till 20:45



NB: the visiting arrangements set out on page 8 apply to all visitors other than the parents.

Arrangements for visiting

- ★ During regular visiting times you should wait in the waiting room until you are allowed to come in. If you unexpectedly arrive later, use the entry phone to announce your arrival and wait until the nurse gives you permission to come in.
- ★ Depending on your child's condition or the condition of the other child in the room, the nurse or doctor may ask you to break off your visit at any time.
- ★ During the ward round, during an admission or transfer and when your child or the other child in the room is being examined, you will be asked to leave the room and wait in the waiting room until you can come back in.
- ★ Regular breaks are provided between visiting times to give you a chance to have some time to yourself. Use these breaks to have something to eat or get some fresh air. You should not feel obliged to be here at all times during visiting times. We understand that you need to give your time to situations at home and at work as well.
- ★ Hygiene is an extremely important part of your child's care. It is therefore essential for you to wash your hands thoroughly as soon as you enter the room. If you have a cold, do not hesitate to ask the nurse for a face mask.
- ★ Other patients are entitled to their own privacy and peace and quiet. During your visit, please devote your attention only to your own child.

VISITING ARRANGEMENTS FOR VISITORS OTHER THAN PARENTS

Visiting times

- ★ from 14:00 till 14:15
- ★ from 19:00 till 19:15
- ★ from 20:30 till 20:45

Arrangements for visiting

Only close family members are allowed to visit (adults and children aged 16 and more). Visiting is limited to a maximum of three people. In exceptional cases visits by younger children may be permitted. This is only allowed after discussion with the nurse in charge.

TALKING TO THE DOCTOR

You can discuss your child's condition with the intensive care doctor during visiting time from 14:00 to 14:15. If this is not a convenient time for you, you can contact the nurse to make an appointment to talk to the intensive care supervisor at any time.

If your child has had surgery and you wish to talk to the surgeon, you can ask the nurse to make an appointment.

TALKING TO THE SOCIAL WORKER

Our unit also has its own social worker. She works in a team with the doctors, nurses and other staff. It is her job to support and guide family members through this stressful time. You can discuss your worries or uncertainties about the admission to the intensive care unit with her in confidence. You can also talk to her about social, family or personal issues. She may also be able to offer advice on your practical and administrative questions.

The social worker is available every day via the reception, the nurses or doctors in the unit or can be contacted directly by telephone on +32 16 34 86 20 (Sabine Vanoost).

TALKING TO THE CHAPLAIN

When your child is admitted to our unit, you may experience all kinds of feelings: fear, helplessness, vulnerability, sadness or insecurity. Suddenly your whole life seems to be falling apart. It can help to share these feelings with someone who is not quite so closely involved.

There is a chaplain linked to our unit. She can help if you would value a supportive chat or if you would like to have a suitable, meaningful ritual for your child: a blessing, a baptism, a prayer for protection etc.

The chaplain is available every working day except Fridays.

You can make contact with the chaplaincy 24 hours a day via the nurse who is caring for your child.

INFORMATION BY TELEPHONE

There is no limitation for you as a parent on getting information about your child by telephone. You can always contact the unit at any time of the day or night on +32 16 34 87 70.

We also want to keep you informed about significant changes in your child's condition. It would help if you are able to give us one or more telephone numbers so that we can contact you easily. These may be telephone or mobile numbers, or numbers of family members or neighbours. Please give these numbers to the nurses who are caring for your child.

ACCOMMODATION FOR PARENTS WHOSE CHILD HAS BEEN ADMITTED TO THE INTENSIVE CARE UNIT

There is no accommodation available at the Gasthuisberg campus itself for use while your child is admitted to the intensive care unit. UZ Leuven does, however, offer the following alternatives:

- ❖ The 'Family accommodation facilities' centre at Campus Sint-Pieter, Brusselsestraat 69, 3000 Leuven. You can make reservations at the Campus Sint-Pieter reception from 9.00 to 12.00 and from 16.30 to 19.30, tel. +32 16 33 70 03. (See also the 'Family accommodation facilities' brochure.)
- ❖ Campus Pellenberg, Weligerveld 1, 3212 Pellenberg can be contacted via reception, tel. +32 16 33 83 65.

There are also hotels in and around Leuven where you may be able to stay. The social worker can help you to find suitable accommodation (see page 9 for contact details).

In exceptional cases

If your child is in a very critical condition, there is accommodation available close to the intensive care unit. These facilities are very limited however, which means that you are normally only allowed to stay there for one night. Arrangements to use this accommodation should be made with the nurse in charge, the receptionist or the social worker.

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