

Procedural Sedation and Analgesia (PSA) Patient Information

While in the Emergency Room (ER), your child may have to get tests or procedures that can cause nervousness, fear or pain. For example, your child may need a CT scan and be scared of small spaces or your child could have a broken arm that needs to be repaired or a cut that needs stitches requiring them to get procedural sedation and analgesia (PSA).

What is Procedural Sedation and Analgesia (PSA)?

PSA means giving medicines that help your child relax or go to sleep (sedative), block pain (analgesic) or not remember the procedure (amnesia). In some cases PSA is used together with medications that numb the area (local anesthetic). **Please don't eat or drink anything in the ER until after the procedure is finished.*

Before the Procedure It is important to tell your doctor or nurse: <ul style="list-style-type: none">○ about any new or old health conditions, diseases or surgeries (asthma, sleep apnea, sickle cell, etc.)○ if your child is taking any medications, herbs, supplements or vitamins- even "over-the-counter" drugs like Motrin○ if your child has allergies to medications or food○ if your child or a family member has ever had difficulty with anesthesia or surgery○ when your child last ate or drank○ who will be responsible for getting your child's discharge instructions, driving your child home, and taking care of your child	How long PSA takes to start and end depends on: <ul style="list-style-type: none">○ the type of test or procedure○ how long it takes your child to wake up and be their normal self<ul style="list-style-type: none">○ It can take 30 minutes to a few hours for your child to wake up and be their normal self. This is because of the medicine your child was given. Everyone reacts to medications in different ways.
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What to expect during PSA?

Your child will be watched during the whole procedure and be put on a monitor that measures oxygen and vital signs.

- heart monitoring pads will be placed on your child's chest and a blood pressure cuff will be wrapped around your child's arm
- a wrap or clip will be put on your child's fingertip to measure oxygen levels
- a small tube may be placed in your child's nose to see how well they are breathing
- an oxygen mask may be put on your child's face if needed

Your child will probably need an IV line put in their arm or hand to get their medications. Medications are sometimes given in your child's mouth or nose or as a shot. After the medicines are given, your child will probably feel sleepy and calm or like they are in a "dream" and may not remember much about the procedure after waking up.

Risks and Side Effects

The use of PSA is usually very safe. Ask your child's doctor to review any possible side effects from your child's medications. The most common side effects after PSA are throwing-up and feeling "light-headed" or weak. Low blood pressure or oxygen may rarely happen during the procedure, which is why your child is watched closely and cared for by a team of specially trained doctors and nurses.

What To Know Before You Go Home Your child cannot be discharged until he or she: <ul style="list-style-type: none">○ has normal vital signs○ returns to their normal self○ can walk without help (2 years or older)○ can drink fluids without vomiting○ has a safe ride home with parent or guardian○ has discharge instructions given to parent or guardian	For the next 24 hours your child should: <ul style="list-style-type: none">○ eat light, healthy small meals and drink plenty of fluids○ avoid driving, riding a bike or playing sports○ follow ER instructions for recovery, wound care, and medications○ schedule follow-up appointments Your child should be able to return to their regular activities after 24 hours <i>unless they have a fracture, concussion or severe injury</i> . Don't forget to ask for a school or work excuse if needed.
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