



# PROCEDURE DAY CHECKLIST:

For health-care providers performing needle procedures in children

Fear of needles is common. In Canada, 2 out of 3 children and 1 out of 4 adults report they are afraid of needles. This can make needle procedures stressful for children, caregivers and health-care providers. **The CARD system (Comfort, Ask, Relax, Distract)** reduces stress during needle procedures. It provides four categories of science-based activities that health-care providers, children and caregivers can use to have a better experience. You can also review the [Planning checklist](#). To learn more about CARD, go to [CardSystem.ca](http://CardSystem.ca).

## EDUCATION OF PATIENTS AND CAREGIVERS

- Provide information about what will happen.
- Provide information about how to cope. School-age children can play the [CARD web game](#).
- Ask children to select coping strategies from the [CARD checklist](#). Parents and caregivers can help younger children.

## ASSESSMENT OF PATIENTS

- Review child's medical history, including level of needle fear and history of fainting. If a child is prone to getting dizzy or fainting, offer [muscle tension](#).
- If a child reports a moderate or high level of needle fear, involve other highly qualified staff (e.g., Child Life Specialist).
- Review what CARDS (coping strategies) the child wants to use and answer questions.
- Provide [topical anesthetics](#) for those who want it.

## DURING THE PROCEDURE

- Minimize visual and auditory fear cues.
- Provide privacy during the procedure.
- Use [what to say](#) and [engagement](#) resource for communication tips.
  - Foster a calm environment and be positive. Focus your attention on the child and if possible sit down near them. Sitting places the health-care provider at eye level with the child and this relaxes them. Do not appear rushed and avoid interruptions.
- Use neutral language and address concerns. Avoid repetitive reassurance.
- Provide balanced information. Tailor the amount of information provided as some children want more information and others want less. Describe sensations and duration, and invite children to tell you how it felt. Do not say the procedure will not hurt.

- Ask children *what CARDS they are playing* (i.e., coping strategies they choose) and accommodate requests. Do not impose coping strategies such as looking away or taking a deep breath. These interventions are counter to the preferred coping strategies for many people and lead to increased levels of fear or distress.
- Use distraction items and activities. Provide distraction items for children who do not have their own but would like to be distracted. Examples include [CARD poster for kids](#), [CARD search and find poster](#) and fidget toys.
- If appropriate, ask about preferred positioning (e.g., lying down, sitting up) and what limb to use (e.g., left arm, right arm).
  - Use [comfort position](#) resource for tips on positioning children. Avoid excessive restraining of children as this increases distress.

## AFTER THE PROCEDURE

- Assess stress-related symptoms, including fear, pain and dizziness. Suggest children use muscle tension exercises if they feel dizzy.
- Obtain feedback from children and caregivers to inform future practice.
- Counsel children and caregivers regarding adverse reactions after the procedure and their management.
- End visit on a positive note. Consider providing rewards (e.g., sticker, photo, treat).

## PRACTICE REVIEW

- Review the experiences and feedback from children and caregivers.
- Debrief with teammates about what went well, areas for improvement, and what can be done differently the next time.
- Incorporate changes into policies and practices.

