Unless someone like you cares a whole awful lot, nothing is going to get better. It’s not.

- Dr. Seuss
What is an “Ouchless” ED?

“The goal of an “ouch-less ED” is to provide family centric care and minimize the pain and anxiety children typically feel when coming to the ED as much as possible.
How was the idea born????
The Journey

Ouchless ED Executive Committee

Funding, Research, Planning

Pediatric Symposium
<table>
<thead>
<tr>
<th>Age</th>
<th>Indication</th>
<th>Onset</th>
<th>Duration</th>
<th>Comment</th>
<th>Location</th>
</tr>
</thead>
<tbody>
<tr>
<td>LMX 4%</td>
<td>All*</td>
<td>IV/LP prep</td>
<td>30min</td>
<td>60minutes</td>
<td>Medication Pyxis®</td>
</tr>
<tr>
<td>*Liposomal Lidocaine not FDA approved under 2 years old</td>
<td></td>
<td></td>
<td></td>
<td>Do not prep site/skin with alcohol prior to application.</td>
<td>Medication Pyxis®</td>
</tr>
<tr>
<td>LET</td>
<td>All</td>
<td>Wound Care</td>
<td>30min</td>
<td>45-60min</td>
<td>Medication Pyxis®</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td>1-3mls in cotton ball. Caution on fingers, toes, nose.</td>
<td>Medication Pyxis®</td>
</tr>
<tr>
<td>J Tip®</td>
<td>&gt;8weeks old -or- &gt;5kgs</td>
<td>IV/LP prep</td>
<td>&lt;30 seconds</td>
<td>1-2hrs</td>
<td>Medication Room</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td>0.25ml of 1% buffered Lidocaine</td>
<td>Medication Room</td>
</tr>
<tr>
<td>Sweet Ease®</td>
<td>Up to 2 months old* -or- 6 months old</td>
<td>IV/Cath UA</td>
<td>10 seconds Peak 2 minutes</td>
<td>5 minutes</td>
<td>Pediatric Cart, Bottom Drawer</td>
</tr>
<tr>
<td>*May use up to</td>
<td></td>
<td></td>
<td></td>
<td>2 drops (0.1ml), 2 minutes before procedure. May repeat 2 drops every 2 minutes up to 3 times. DNE 2ml.</td>
<td>Pediatric Cart, Bottom Drawer</td>
</tr>
<tr>
<td>ShotBlocker®</td>
<td>All</td>
<td>IM/SQ</td>
<td>Immediate</td>
<td>20 seconds</td>
<td>If procedure not done in 20 seconds, remove from skin for 1 full minute then attempt again.</td>
</tr>
<tr>
<td>Buzzy ®</td>
<td>All</td>
<td>IV/IM/SQ</td>
<td>Immediate</td>
<td>Until done</td>
<td>For Analgesia &amp; Sedation: Fentanyl Naloxone Midazolam Naloxone</td>
</tr>
<tr>
<td>MAD</td>
<td>All</td>
<td>IN medication</td>
<td>Variable</td>
<td>Variable</td>
<td>Medication Room</td>
</tr>
</tbody>
</table>
Child Life Education from Benioff
Staff Enjoying The Symposium
Hands On Practice Using MAD
Hands On Practice Using J Tips
The Journey

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- Marketing and Go-Live
Safe & Calm

CATHY TAYLOR AND Michelle Tracy had never met, but the two Marin moms had something in common: they both suffered through upsetting hospital visits with their children that inspired them to make emergency room care work better for families.

Taylor, a sonographer at University of California–San Francisco Medical Center who lives in Greenbrae, brought her then-3-year-old to Marin General in an ambulance with complications from croup. She was dismayed that when her son cried for his daddy, he couldn’t see him, because a flu-season one-visitor policy relegated Dad to the waiting room.

Tracy, who lives in Corte Madera and manages Marin General’s emergency and trauma departments, had an experience no parent ever wants to face: after a car accident, she was prevented from seeing her critically injured 4-year-old. “When your child is in a critical accident and she may not make it through the night, her mother should be by her side. And that wasn’t allowed,” she says. Initially she was even denied information about whether her daughter had survived. “The physician told me, ‘if you don’t calm down, I’m not telling you anything about your daughter,’” she recalls.

Both children recovered, although Tracy’s now-adult daughter faces lifelong challenges due to traumatic brain injury. But neither mother was prepared to merely complain to management and move on.

Months before her distressing visit to Marin General, Taylor had encountered a completely different style of care when her son got hurt at Disney World and received stitches at Orlando’s Arnold Palmer Hospital for Children. A child life specialist (a professional who helps kids and parents cope with treatment) advised
New Pediatric Rooms
New Pediatric Rooms
The Journey

Ouchless ED Executive Committee

Pediatric Symposium

Funding, Research, Planning

Marketing and Go-Live

Emergency Nurses Pediatric Certification

Child Life Specialist
Infants, children, youth, and families benefit from help coping with the stress and uncertainty of illness, injury and treatment. Certified Child Life Specialists® provide evidence-based, developmentally appropriate interventions including therapeutic play, preparation and education that reduce fear, anxiety, and pain for infants, children, and youth. Certified Child Life Specialists are educated and trained in the developmental impact of illness and injury. Their role helps improve patient and family care, satisfaction and overall experience.
The Journey

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- Child Life Specialist

*The Future: EDAP designation by the County of Marin*

*Nursing Certification in Pediatric Emergency Nursing*
A person's a person, no matter how small.

-Dr. Seuss