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Evaluation effectiveness of cartoon and bubbles distraction techniques on relief pain and fear during intravenous injection of school age children

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Pain Perception in children is complex, and is often difficult to assess so that review of pain assessment scales that can be used in children across all ages. Pain management in children is not always optimized in various healthcare settings. It is important to discuss how control pain and distraction techniques during painful procedures should be used to guide children's attention away from the painful stimuli. The study aimed to evaluate effectiveness of cartoon and bubbles distraction techniques on relief pain and fear during intravenous injection of school age children. An experimental study was undertaken on children from 6 to 12 years age who were undergoing intravenous injection. The current study was conducted in pediatric outpatients' clinical and pediatric wards at Sohag University Hospital on December 2015. The study sample comprised of 90 school age children selected through purposive sampling method was divided into 3 equal groups, (30 children in bubbles distraction group, 30 children in cartoon distraction group and 30 children in control group). There were four tools used in the current study as the following: A structured socio-demographic questionnaire, Numeric Rating Scale (NRS), Wong-Baker FACES Pain Rating Scale and Children's Fear Scale. The current study revealed that (53.3%) were from the females and (46.7%) from males in distraction group, where the mean age in distraction group was (8.3+1.4) years. A highly significant difference between controls, bubbles and distraction regarding mean scores of pain on numeric rating scale. It was concluded that cartoon and bubbles distraction are effective distraction techniques to reduce pain and fear among children during intravenous injection. The nurses working in clinical area should follow the practice of cartoon and bubbles distraction during intravenous injection in order to reduce pain and fear related to intravenous injection.

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