The American Society of PeriAnesthesia Nurses (ASPN) advocates for an environment of safety in which perianesthesia registered nurses deliver quality care to this most unique population as they undergo anesthesia and surgery. Foremost, perianesthesia registered nurses have the responsibility of recognizing the uniqueness of age-related pathophysiologic and anatomical differences found with the pediatric patient. Special consideration should be given to the assessment of the pediatric respiratory system and subsequent airway management, pain management, pediatric-specific surgical procedures and illnesses.

ASPN promotes and encourages seminars and continuing education offerings that pertain to the pediatric patient. Perianesthesia registered nurses must demonstrate competencies in recognizing age specific pathophysiology while incorporating a basic understanding of growth and development to ensure a return to optimum health for the pediatric patient. The safety and well-being of the child must be maximized and supported to prevent complications and decrease risks when they are under the influence of anesthesia agents and its adjuncts. Effective nursing care of the pediatric patient requires a specialized knowledge base that is developed through expert opinion, evidence-based nursing practice, education, available research and leadership. It is to be remembered that the care the pediatric patient receives starts prior to the day of surgery with the preoperative interview. The inclusion of the family/caregiver in the care of the pediatric patient is essential for optimal recovery and return to health.

**Background**

Perianesthesia registered nurses caring for children require advanced competencies in understanding the growth and development of the pediatric patient (described as 0 to 18 years), cognitive variations, emotional needs and physical differences.

During the preanesthesia assessment, potential problems must be identified which may include, but not be limited to: current health status, prior medical history, presence of autism, seizure disorders and congenital anomalies, developmental or physical syndromes (particularly those that affect the airway), cardiac anomalies, airway issues (e.g., asthma, reactive airway disease, laryngomalacia, tracheomalacia, croup), diabetes, family history for malignant hyperthermia and low pseudocholinesterase levels.

Discharge teaching and planning begin at first contact. Perianesthesia registered nurses need to identify age-appropriate language and communication methods for the patient and their family/caregiver in order to promote a positive outcome.

*Refer to ASPAN’s Competency Based Orientation and Credentialing Program for the Registered Nurse Caring for the Pediatric Patient in the Perianesthesia Setting as a guide to review pediatric patient care throughout the perianesthesia experience.*

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**POSITION STATEMENT 7**

American Society of PeriAnesthesia Nurses

A Position Statement on the Pediatric Patient

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The perianesthesia team must advocate for the special needs of pediatric patients to ensure that their perioperative experience is optimal from first contact to discharge to home. Age appropriate assessment, treatment and management of pain are of primary importance.

**Position**

It is the position of ASPAN that perianesthesia registered nurses seek knowledge of and develop skills in the care of the pediatric patient to promote positive outcomes in perianesthesia settings.

To provide optimal care of the pediatric patient:

- A commitment to family-centered care is necessary. This includes involving the family in all levels of the perianesthesia experience from preadmission through discharge. Special attention to an understanding of the need to allow input into or involvement in the plan for anesthetic induction as well as reuniting families in a timely manner should be encouraged

- The utilization of a standardized preoperative health history screening tool is recommended for the pediatric population to ensure the perianesthesia needs of the pediatric patient and their caregivers are met

- The preoperative history screening tool should contain questions that are specific enough to illicit needed information in order to provide the best care possible for this population

- In non-pediatric facilities it is important to provide a specialized area for pediatric patients to promote a comforting environment

- Integrate issues related to pediatric considerations into perianesthesia education, research and clinical practice

- Encourage research activities related to perianesthesia pediatric considerations

- Promote PALS/PEARS certification for any perianesthesia registered nurse providing care to the pediatric patient

- Utilize the ASPAN Competency Based Orientation and Credentialing Program for the Registered Nurse Caring for the Pediatric Patient in the Perianesthesia Setting to support and enhance knowledge and skills in the care of the pediatric patient

**Expected Outcomes**

Perianesthesia registered nurses will be knowledgeable in the assessment and care of the pediatric patient and their family/caregiver.

All perianesthesia registered nurses will familiarize themselves with and inform other members of the health care team of this position statement.

ASPN, as the voice of perianesthesia nursing, must externalize this information by sharing this position with regulatory agencies and professional organizations that interface with the perianesthesia nursing specialty.
Approval of Statement
This statement was recommended by a vote of the ASPAN Board of Directors on April 18, 2009, in Washington, DC, and approved by a vote of the ASPAN Representative Assembly on April 19, 2009, in Washington, DC.

This position statement was updated and revised at the October 2015 meeting of the Standards and Guidelines Strategic Work Team in Fort Worth, Texas.

REFERENCE

BIBLIOGRAPHY