

# INJECTION TIPS

## Managing Blood Draws and Injections

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### A Parent's Advice

By Maureen K.

*(Maureen K. is the parent of a child with hepatitis B. In this article she shares her experience and insights into the challenges of administering interferon injections at home and making blood draws as easy as possible.)*

Our daughter underwent six months of interferon therapy starting at 14 months of age. My husband and I administered the interferon alpha injections three times each week at home.

We gave the injections at night in order to ease any side effects such as flu-like symptoms, fatigue, low-grade fever and weight loss. We were fortunate she did not experience many side effects, with the exception of fatigue. But even her fatigue appeared to diminish after the first couple of weeks.

In hindsight, we were quite surprised at how well she tolerated the injections, but we worked hard to make the process as easy and painless as possible for her. The needle used for these injections was quite small so I don't think it was really too painful for her. Our daughter would only cry for about 15 seconds during the injection, and then we would quickly put her into the tub, which was something she really loved.

Our specialist at Johns Hopkins Children's Hospital provided us with some wonderful suggestions to ease the injection process.

- Try to dedicate one room in which to give your child injections. When you change the location where you give the injection, or give it to them in a room where they usually play, it can cause them stress and take away that sense of having a totally safe place. We did our injections in the guestroom, a place our daughter rarely went. That way, she felt safe in every other room of the house.
- Do not give any injections in your kitchen or bathroom. No matter how clean you are, these rooms are a source of numerous germs.

- Minimize the number of times you insert a needle into the vial. Our nurse told us it dulls the needle, which in turn makes the injection more painful for a child. This is particularly relevant if you need to draw medication from two vials. Although we were careful not to be wasteful, if there was only a very small amount of medication remaining in the bottom of a vial, we didn't use it. We started a new vial.
- We did not use the EMLA (lidocaine/prilocaine) cream. This is a cream that numbs the skin when rubbed into the injection site one hour ahead of time. Our nurse did not recommend it for the three weekly interferon injections. It takes at least one hour for the cream to work and the nurse specialist said this tended to make the kids more anxious because they spend that entire hour worrying and anticipating the shot.
- Don't take your child into the shot room until you are ready to immediately swipe with alcohol and inject. Our little one would cry as soon as she crossed the guest room threshold. Minimizing the time she spent thinking about and anticipating the injection made a HUGE difference. My husband and I often switched jobs during the injection process. One of us would prepare the injections and be waiting for her in the guest room. The other would bring her up, leg bared, and hold her for the actual injection. Injections were given intra-muscularly in the upper, outside part of the thigh. The area was wiped clean with an alcohol wipe and the injection given. She was in and out of there in less than a minute. Her crying stopped as soon as she left the room.
- Traveling required preparation and a bit of ingenuity during interferon treatment. My husband would take the interferon box (without the vial) and put it in a zip-lock plastic bag. Then he would put water around it and freeze it into a block. When it was time to travel, we would put the vial back in the box/bag in the plastic container. The first big trip, we forgot about the sharps container, but we found a Rubbermaid sealable butter dish, which was small and convenient for holding the used needles until we could dispose of them properly in our sharps container at home.

### **Managing Trips to the Lab**

Lab work and the associated blood draws are another stressful part of a child's treatment protocol. We worked hard to make the visits as painless and easy on our daughter as possible.

We would call our lab ahead of time to ensure that someone with pediatric experience was working that day. I even had our doctor's office call the first day because we had had a terrible experience when blood was drawn from our older daughter by a technician

who was inexperienced with children.

Once we found someone we liked, we only used that person and would call to confirm she was working that day. We also used a system that minimized the associated anxiety for our daughter. The lab tech would have everything ready to go—tubes, gloves and assistants—prior to our daughter entering the room.

This extra effort made a huge difference in the whole procedure. A few other invaluable lab tips we picked up along the way have also made a big difference in the ease of drawing our daughter's blood:

- Be sure that your child is well hydrated. Pump them full of liquids! This will make it easier for the lab tech to find a vein.
- Make sure that your child is kept warm prior to their draw. Veins are more difficult to locate if they are cold.
- Try to get your child to open and close their fists. Once again, this makes it easier for the lab technician to find a vein.
- EMLA cream is a very helpful aid. We swore by it in the early days, but have resorted to using it less and less. EMLA will completely numb the area if used one to two hours before the blood draw. However, at this point we have found that it is the process of the blood draw and not the “stick” itself that causes the tears and anxiety. Therefore the EMLA cream started making our daughter more anxious just by having it on her arm. Plus the EMLA cream can also make it a bit more difficult for the lab technician to find a vein as it tends to shrink them a bit. I would have to say that EMLA cream is a personal decision that should be made by each family.

Remember to be an advocate for your child! A phlebotomist at Johns Hopkins once told me, “Honey these are the only veins you’re going to get. If someone is having too hard a time finding a vein on your child, then ask for someone else. Don’t let anyone unnecessarily scar her veins.”

Sometimes, no matter how well you have prepared ahead of time, your child will experience a bad blood draw. If you see that the phlebotomist is struggling, or is uncomfortable and has stuck your child a few times without success, you need to stop them and ask for someone else to continue the draw.

Each child is unique and everyone will need to come up with a routine that works best. These are only a few suggestions that were successful during our daughter's interferon

treatment and they continue to be successful whenever we make visits to the lab.