

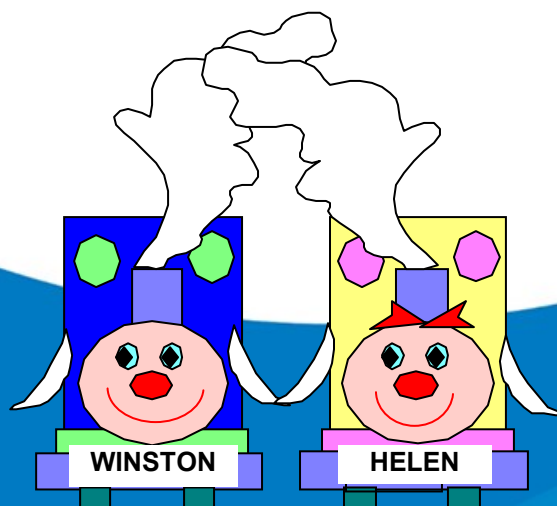
# Paediatric High Dependency Care (HDU)

## What to expect when on the unit - Advice for patients and their parents/ carers

This leaflet can be made available  
in alternative languages / formats on request.

*如有需要，本传单可提供其他语言/版式  
此單張的其他語言/格式版本可按要求提供*

Na żądanie ta ulotka może zostać udostępniona  
w innych językach/formatach.



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**Department:** Paediatric

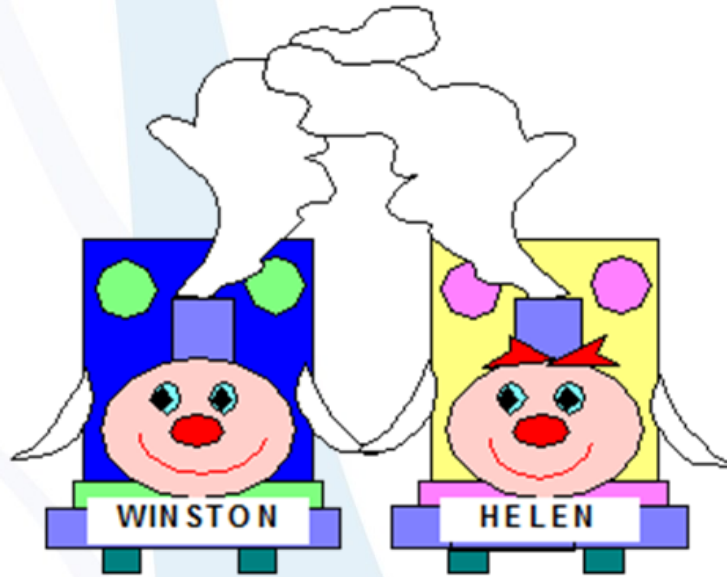
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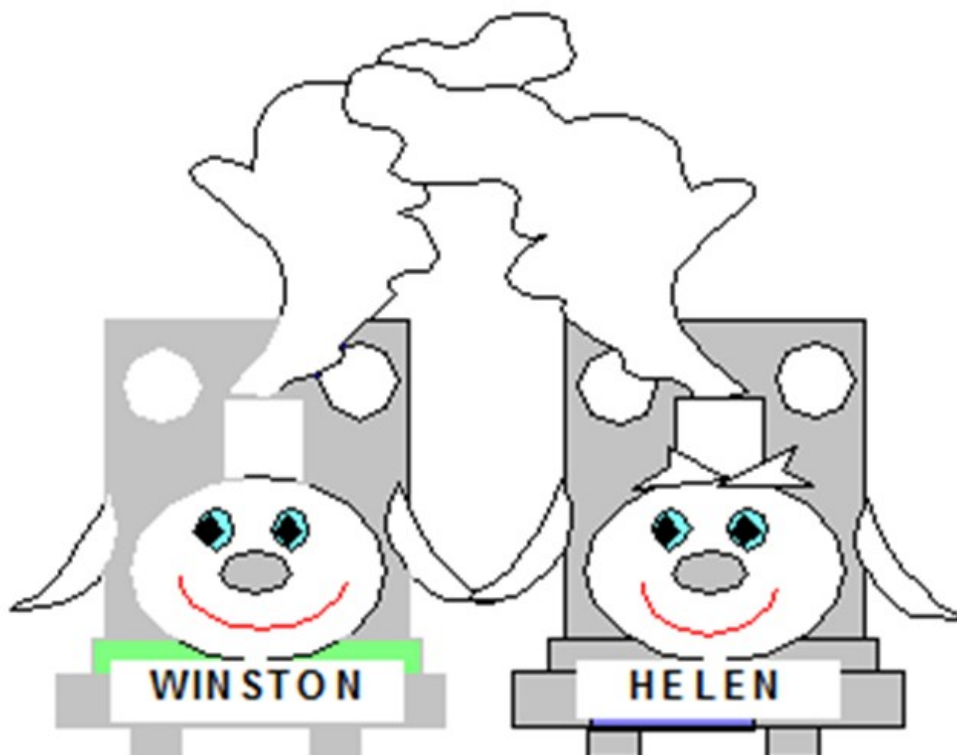
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**Have you met Winston and Helen?**

**They are the mascots for our children's wards!**



**Winston and Helen are feeling poorly.... Can you help them feel better and give them some colour back? Ask your nurse for some crayons to help Winston and Helen !!!**



## Do you know what HDU is?

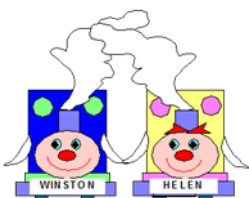
Our High Dependency Unit (HDU) provides a level of care for children requiring more observations, interventions or monitoring than can be provided on our general ward areas. Your nurse will be looking after a maximum of 2 children.

## Our HDU rooms



## Our Resuscitation Boards

Please do not be alarmed if this board is completed with your child's details, it does not necessarily mean that resuscitation is needed. We complete it as standard practice.



St. Helens & Knowsley Teaching Hospitals NHS Trust			
PAEDIATRIC RESUSCITATION			
Name		Age	
<b>Estimated Weight</b>			
0-12 Months	$(0.5 \times \text{age in months}) + 4$	=	<input type="text"/> kgs
1-5 Years	$(2 \times \text{age in years}) + 8$	=	<input type="text"/> kgs
6-12 Years	$(3 \times \text{age in years}) + 7$	=	<input type="text"/> kgs
ET Tube	size $\left(\frac{\text{age in years}}{4}\right) + 4$	=	<input type="text"/> mm
DC Shocks	4j/kg	4 x	<input type="text"/> Joules
Adrenaline 1 in 10,000	0.1ml/kg	0.1 x	<input type="text"/> mls
Amiodarone	Shockable rhythm only 5mg/kg	=	<input type="text"/> mg <small>after 3rd and 5th shock</small>
Glucose 10%	2mls/kg	2 x	<input type="text"/> mls
Fluid Bolus NaCl 0.9% Trauma	20mls/kg 10mls/kg	20 x 10 x	<input type="text"/> mls
Lorazepam	0.1mg/kg	0.1 x	<input type="text"/> mg
Phenytoin	20mg/kg	20 x	<input type="text"/> mg
<small>Max 2g in 0.9% NaCl</small>			

**HDU can look scary but it is a safe place..... our friend Parsnip the Polar Bear likes being in HDU!**



**Parsnip's favourite food is banana on toast ....**

**What is your favourite food?**







## Information for parents/carers visiting

Whilst the best thing for a child in HDU is rest, peace and quiet; we do recognise the need for support from family and friends.

Visitors are welcome between midday and 8pm. However, please try to ensure they don't all arrive at once as there is not much spare room in HDU and, if the room is overcrowded, it will be difficult for medical/nursing staff to care for your child.

If you do need someone to bring you some clothes, personal belongings, etc, then they can do this at any time.

If you have any concerns regarding visiting, then please do speak to your nurse as we will always do everything we can to support you and your wishes.

## Staying with your child

Two parents/carers can stay overnight with their child in HDU. However, as there is only space for one adult bed in the cubicle, the other parent/carer will need to sleep in the chair.



## Taking care of yourself

Whatever the length of your child's stay in HDU, it is important for your child's wellbeing that you take good care of yourself. We recommend you try to follow the steps below:

- Eat regularly, even if you don't feel like it
- Drink plenty of fluids, the environment on the wards is very dry
- Go for a walk, even just in the corridor for a few minutes
- Try to get a few hours rest every day
- Take breaks, even short ones
- Have a notepad and pen so you can write down any questions as you think of them
- Ask questions, no question is a silly question
- Talk to your child or read stories, even if they are sedated they may well hear you.

**Speak to a member of staff if you have any concerns, questions or suggestions during your child's stay on HDU.**

## Some of the medical equipment in HDU can appear quite scary until you know more about what it is for.

All our children are connected to machines that beep and alarm frequently and staff understand these sounds and noises and will know how to respond to them.

During your child's stay, you will learn more about these machines but please do not hesitate to ask the staff if you have any questions.

## Below are some pictures and explanations of the equipment you may see in our HDU area:

### Heart, breathing, blood pressure and oxygen saturation monitor



This is a machine that gives a picture recording of your child's heart and breathing pattern. The monitor is attached to the chest like plasters by thin wires.

A special light probe is placed on the toe, foot, finger or hand and is used to measure the level of oxygen in the blood.

A blood pressure cuff will be used to measure blood pressure. This may be done once or regularly depending on condition and diagnosis.

**Parsnip the Polar Bear is wearing his wires .....**



**Electrodes for babies look a little bit different, like the ones pictured below:**



**Parsnip has some other wires too ..... he has a 'blood pressure' cuff on his arm and an 'oxygen saturation' probe on his paw!**



**Looks like Parsnip is asleep .....Shhhhhh!**

**Please be quiet in HDU**





## What to expect whilst in HDU

Your child may need intravenous fluids (a drip) and antibiotics administered via a cannula which is a small tube inserted under the skin.

Your child may also require oxygen therapy via nasal prongs, an oxygen mask, head box oxygen (for small babies) or humidified oxygen.

Some children require Optiflow, which is high flow humidified oxygen used to help keep the upper airway open so that breathing is easier.

Most children can be nursed on the main ward when using Optiflow.

However, some children do require closer observation and are moved into HDU.

We routinely keep in close contact with the anaesthetic team for patients on HDU, so please do not be alarmed if they come in to check on our child.

We would also call on the help of the anaesthetic team if a patient deteriorates and requires intubation.

This is when a patient cannot breathe for them self and needs help.

They will be anaesthetised and a tube inserted into their mouth.

A nurse will discuss this with you if they think it may be a possibility.



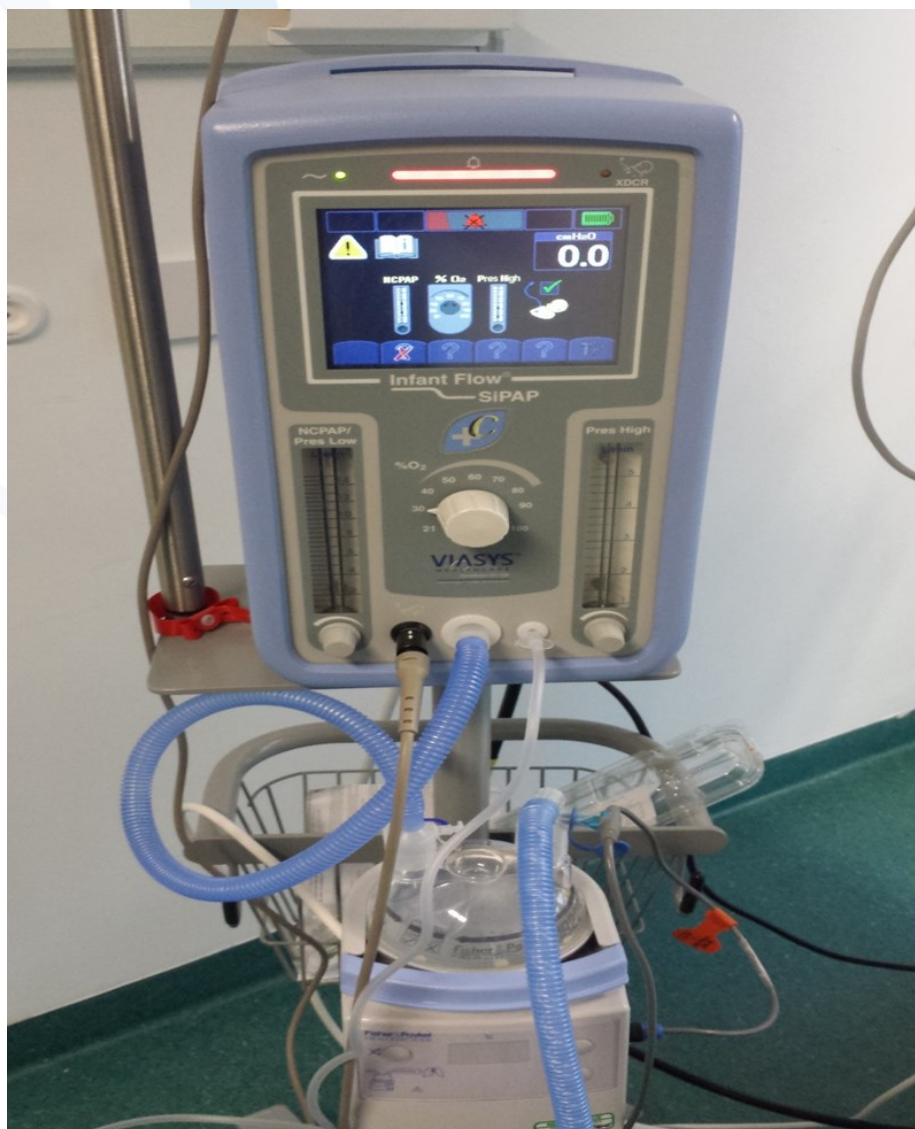
## Optiflow Junior



**Parnsip is 'wheezy'  
and he needs some Optiflow to help him breathe. Parnsip  
says it feels nice and warm in his nose.**



## SiPAP machines



**You may hear this machine called different names, such as CPAP/BiPAP/Biphasic.**

Basically this machine helps keep the lower airways open and it is used on children who need more support with their breathing than Optiflow can provide.

CPAP helps with breathing by delivering air into the nose to keep the lungs partially inflated. There are various 'Modes' available on this machine to support breathing and your child's nurse will discuss with you which one has been selected and why.

## Parents/Carers:

Once your child's condition improves, he/she will be 'stepped down' and transferred on to the main ward area to continue their recovery.

Your child may be moved in or out of HDU at any time of the day or night but we do always try our best to avoid moving a child during the night.

Sometimes, however, it is unavoidable and we will make every effort to minimise the disruption to you.

If your child has been moved onto the main ward area and becomes poorly again, then he/she may be transferred back into HDU.

**If your child's condition deteriorates and they require more intensive care, we may need to transfer to a specialist hospital as Whiston does not have a paediatric intensive care unit. In this case, we would contact the North West Transfer Services (NWTs) to arrange transferring your child.**







**Parsnip is feeling much better now! So he is leaving HDU and going out onto the main ward until he is ready to go home. Parsnip knows he has to keep wearing his oxygen and taking his medicines if he wants to go home.**



**Thank you for reading about HDU and Parsnip.**



**Did you read it all?**

**Let's see.....**

**How many times did you see Winston in our booklet?**

**How many times did you see Helen in our booklet?**

**Can you remember what Parnsip's favourite food is?**

**Parsnip says "Eat Some Bananas and  
Get Well Soon"**

**If you need to contact the department, please phone  
either:**

**Ward 3F      0151 430 1616**

**Ward 4F      0151 430 1791**

Whiston Hospital  
Warrington Road,  
Prescot, Merseyside, L35 5DR  
Telephone: 0151 426 1600

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