

# **Patient Preparation**

**Patient Preparation** - Patients should be prepared for vaccination with consideration for their age and stage of development. Parents/guardians and patients should be encouraged to take an active role before, during and after the administration of vaccines.

- **Screening** - All patients should be screened for contraindications and precautions for each scheduled vaccine. Many state immunization programs and other organizations have developed and make available standardized screening tools. Sample screening forms for children and adults are available from the Immunization Action Coalition ([www.immunize.org](http://www.immunize.org)).

- **Vaccine Safety & Risk Communication** - Parents/guardians and patients are exposed through the media to information about vaccines, some of which is inaccurate or misleading. Healthcare providers should be prepared to discuss the benefits and risks of vaccines using Vaccine Information Statements (VIS) and other reliable resources. Establishing an open dialogue provides a safe, trust-building environment in which individuals can freely evaluate information, discuss vaccine concerns and make informed decisions regarding immunization.

- **Atraumatic Care** - Vaccine safety issues and the need for multiple injections have increased the concerns and anxiety associated with immunizations. Healthcare providers need to display confidence and establish an environment that promotes a sense of security and trust for the patient and family, utilizing a variety of techniques to minimize the stress and discomfort associated with receiving injections. This is particularly important when administering vaccines to children.

- **Positioning & Comforting Restraint** - The healthcare provider must accommodate for the patient's comfort, safety, age, activity level, and the site of administration when considering patient positioning and restraint. For a child, the parent/guardian should be encouraged to hold the child during administration. If the parent is uncomfortable, another person may assist or the patient may be positioned safely on an examination table.

• **Pain Control** - Pain is a subjective phenomenon influenced by multiple factors, including an individual's age, anxiety level, previous healthcare experiences, and culture. Consideration for these factors is important as the provider develops a planned approach to management of injection pain (see “Be There for Your Child During Shots” poster).

- *Topical Anesthetics* or a vapocoolant spray may be applied to decrease pain at the injection site. These products should be used only for the ages recommended and as directed by the product manufacturer.

- *Analgesic Agents* - A non-aspirin containing pain reliever may be considered to decrease discomfort and fever following vaccination. These products should be used only in age-appropriate doses.

- *Diversionary Techniques* - Age-appropriate non pharmacologic techniques may provide distraction from pain associated with injections. Diversion can be accomplished through a variety of techniques, some of which are outlined on the “Be There for Your Child During Shots” poster.

- *Dual Administrators* - Some providers favor the technique of two individuals simultaneously administering vaccines at separate sites. The premise is that this procedure may decrease anxiety from anticipation of the next injection(s). The effectiveness of this procedure in decreasing pain or stress associated with vaccine injections has not been evaluated.