



## Paediatric Intensive Care unit Nursing Procedure: Application of Splints

**Splints are applied to children on PICU when one or more of the following applies:**

- The child has a critical airway
- The child is adequately sedated as assessed with unit assessment tool and pain free but unco-operative
- The child is repeatedly attempting to grab at their:
  - Endo-tracheal tube
  - NG/NJ/PEG tube
  - Essential drains
  - Urinary catheter
  - Items used to monitor them despite analgesia and sedation
- Child at risk of contaminating major wound sites
- A consultant specifically requests their use due to clinical risk despite optimizing sedation and analgesia

Parents should be given an explanation prior to the application of splints if possible.

Staff should follow Algorithm guideline when applying splints.

### **Application of splints**

Measure the child's arm from armpit to wrist

Select appropriate splint from store

Apply using Velcro straps

Splints are for single patient use only

Once splints have been applied:

- They should be taken down every 4 hours to relieve pressure and to check for marks
- Any marks should be recorded on care plans.

- If the child has I.V, I.A. lines under their splints, it will be necessary to take the splints down 2 hourly. (Arterial lines should be checked hourly)
- Use of splints should be reassessed at least daily, on the morning ward round, together with sedation and analgesia assessment.

## **References**

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