I am coming to Cincinnati Children’s Hospital to have surgery. The first thing I will do is check in at the desk. The registration worker will ask my family some questions and type my information into a computer.
They will put a wrist band around my wrist or my ankle. It will have my name and other information on it. I need to wear this band so the hospital staff can read my important information.
They need to see how tall I am and how much I weigh. I will need to stand with my back to the size chart to see how tall I am. I will also stand on the scale to see how much I weigh.
Next, I’ll go to the “getting ready room”. A couple of people from my family can come back with me. I’ll meet a lot of people when I’m in this room. Their job is to help me get ready for my surgery. They are all very nice.
In the “getting ready room”, they will listen to my heart and lungs with the stethoscope. I will take deep breaths in and out.
Next, I will have my temperature taken. The nurse will use a special thermometer that goes across my forehead and behind my ear. Some boys and girls say it tickles. I can listen for the beep to know that I’m all done with this job.
Then they will put the pulse ox on my finger. The pulse ox is sometimes called a “finger light”. It looks and feels like a Band-Aid and glows red. It tells the nurse how well I am breathing. I leave it on until the nurse says it is time to take it off.
I will get my blood pressure checked. A cuff is placed around my arm. It will squeeze my arm for just a little bit. If I hold very still, this job will move quickly.
Then, I will change into hospital pajamas. If I am feeling nervous or have questions about being at the hospital, I can ask to talk to a Child Life Specialist. A Child Life Specialist’s job is to help me understand what’s going on and make my hospital visit easier.
When it is time for my surgery, I’ll take a ride on a bed with wheels, called a “stretcher”. Someone from my family can come with me. I will ride on the bed to go to the place where I will be having my surgery.
This room is the induction room or “sleepy air room”. Sometimes boys and girls go to this room, and sometimes they go right into the operating room. I will see a big machine and people with special green clothes and hats that cover their hair. They are nice and friendly and will be with me while I have my surgery.
There will be a soft mask that will give me “sleepy air” or anesthesia. I’ll get to choose what smell I want for the “sleepy air”. The scents are bubblegum, cherry, strawberry, or watermelon. The smell is sprayed into the soft mask or tubing. The doctor will gently hold the soft mask with the sleepy air over my nose and mouth. I can stay on the bed or ask if I can sit in my grown-up’s lap while I smell the sleepy air. I will take deep breaths until I fall asleep.

- For older patients: At times it may be decided that a patient will need to have anesthesia through an IV. An IV is a catheter or “tiny straw” that will go into a vein in your hand or arm. The IV may be done in the “getting ready room” or in the operating room. An anesthesia staff member will talk to you to make a plan for your anesthesia. If you have questions or are feeling nervous, you can ask to talk to a Child Life Specialist.
This room is called the operating room. This is where I will have my surgery. Going to sleep for surgery is different than when I go to sleep at night. When I sleep at night, I might wake up if I hear a noise or if someone gently shakes me. After I breathe the “sleepy air” and fall asleep, I will not be able to see, hear or feel anything during my surgery. When my surgery is over, the doctor will stop giving me the sleepy medicine and I will slowly wake up.
When I wake up from my surgery I will be in a special room called the recovery room, or “wake up room”. I will have my own nurse taking care of me as I wake up. I may still need a soft mask to give me oxygen or “wake up air”. One or two adults from my family may sit next to me. If I don’t see my family when I first open my eyes, I can ask the nurse for them.
When I wake up, I may have a catheter or “tiny straw” called an IV in my hand. The IV helps give me medicine and water. There will be tape on it and the tape will wrap around a small pillow to help my hand stay still. The IV does not hurt, but it feels a little different. I may be able to have a drink or a popsicle when I wake up. The nurse will let me know when I can have something.
If the doctor says that I may go home after my surgery, the nurse will take my IV, or “tiny straw” out. I will get to ride out to my car in a wheelchair. Everyone will take good care of me at the hospital.
If the doctor decides that I will need to spend the night or stay for a few days, I’ll go to an in-patient or “sleep-over room” like this one. There is a pull-out bed so someone from my family may be able to stay in the room with me.
If the doctor decides that I will need to stay in an ICU room, this is what the room looks like. ICU stands for the Intensive Care Unit. This is a room where I will have one nurse that will just take care of me.