

## What is delirium?

Delirium (duh-leer-ee-um) is a change in your child's thinking or behavior caused by changes in how their brain works. This can happen in children who are in the hospital, even 1 day. Delirium:

- Can happen to babies and children during their ICU stay.
- Will get better:
  - As your child's condition improves.
  - As they get normal sleep.
  - As they are able to be as active as they can.
- Is temporary (short-term).

## What are the possible symptoms?

If your child has delirium, they may:

- Seem anxious, agitated or restless.
- Pull at lines, breathing tubes and wires.
- Not know where they are or understand what is going on around them.
- Not understand what is being said to them or not able to talk clearly to others.
- Have trouble paying attention, following directions or remembering things.
- Not be comforted with usual soothing.
- Sleep too little or too much, during the day or night.
- Think, see or hear things that are not really there (but seem real to your child).
- Have memories from times of delirium that can be very scary.

These symptoms may:

- Come and go.
- Get better or worse for a period of time.

Talk with your child's care team if you notice any symptoms.

## What causes delirium?

Delirium in the ICU is caused by changes in your child's brain function (how it works). This may be due to:

- Side effects from medicines (such as those needed to help keep your child safe and comfortable).
- Not being able to move around.
- Not having a normal sleep schedule.
- Severe (very bad) illness.

**In case of an urgent concern or emergency, call 911 or go to the nearest emergency department right away.**

## Delirium in the ICU, continued

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### How can delirium be prevented?

Your child's care team is committed to the best care for your child. The team cannot fully prevent delirium and cannot say who will or will not have it.

Talk with your child's care team about what is best for your child. In general, your child's care team will:

- **Treat the illness** causing the delirium.
- **Check for delirium.** If your child is in the ICU more than 1 day, the nurses will check your child for signs of delirium in the afternoon and during the night.
- **Give day and night sleep support.**
  - During the day, blinds are open and lights are on. (Short naps are OK.)
  - During the night, it is kept dark and quiet.
  - The nurse will still check on your child, such as to check their I.V. lines, but they will stay as quiet as possible.
- **Avoid certain tasks during sleep time.**
  - This may include baths, weight checks and linen changes.
  - Sometimes, a quick clean-up or linen change may be needed, but the team limits this as much as possible.
- **Remove any tubes or wires that are not needed.**
- **Help your child to be active.** The ICU team may help with safe movement, daily routines and talking with your child. When your child is ready, other teams may start to working with them. This may include:
  - Child Life
  - Physical Therapy (PT)
  - Occupational Therapy (OT)
  - Speech Therapy (ST)
- **Give pain medicine as needed to help keep your child comfortable.** If your child is stable, they will have a “holiday” (a small break) from their pain medicine every day. This helps prevent too much pain medicine from building up in their system.
- **Ask Child Life** to use play or other activities to help relieve stress, fear and anxiety.
- **Decrease loud noises and bright lights in the room.**
- **May give medicine that could help your child rest, feel calm or think more clearly.**

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# Delirium in the ICU, continued

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## What can I do to help?

Some guidelines for helping your child are listed below.

- **Be calm and reassure your child.** Encourage them with their progress.
- **Help your child know whether it is day or night.**
  - Open blinds by 8:30 a.m.
  - Turn on lights during the day.
  - Close blinds at night. Turn off lights and TV.
  - Avoid phone calls during sleep time.
  - Do not place music or sound machines in your child’s bed. Limit the sound level to prevent later hearing problems.
  - Please let your child’s care team know if they are being too noisy.
- **Use familiar items and routines.**
  - During the day, you may read to your child or play music. You may also bring movies from home or watch TV. This may help distract your child.
  - You may bring blankets, stuffed animals or toys from home. Place them in your child’s bed to help them fall asleep.
  - Use your home bedtime routine in the hospital. If your child always has a bath or reads a book before bed, please let your child’s nurse know. The team can add these routines to your child’s plan of care.
- **Bring in hearing aids or glasses** if your child uses them at home.
- **Remind your child** where they are, what date it is, and what time it is. Tell them that you are with them. This can help them feel less confused.
- **Ask Child Life or your child’s nurse about a communication device.** If your child is unable to speak, a communication device may help them talk with you and the care team. Child Life may also help your child play and relieve stress from the ICU stay.
- **Ask how you can help with your child’s care.** Talk with the team about how you can help care for your child. How you can help may change from day to day. It depends on how your child is improving or if they need more rest.

**This teaching sheet contains general information only. Talk with your child’s doctor or a member of your child’s healthcare team about specific care of your child.**

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