FACTSHEET

The facts about drips

What is a drip?

A drip is also sometimes known as a cannula or IV. It is a short, small plastic tube that is put into your child's vein using a needle. The plastic tube is then left in so that fluids and medicines can be given directly into the blood via the vein. It can also sometimes be used to take blood samples.

Why would my child need a drip?

The drip will allow your child to be given fluid or medicines directly into a vein quickly and for up to several days. It is usually used when children are too sick to swallow fluids and medicines, or when the medicine can only be given this way.

How is it put in?

The doctor or nurse may put a local anaesthetic patch on the skin first to numb the area where the needle is to be put. It takes about 30-60 minutes for the patch to work. If the drip needs to be put in urgently there may not be time to wait for the local anaesthetic to work.

A tourniquet (elastic belt) is put around your child's arm or leg. Your child will need to be still while a small needle is put into a vein. Once the needle is in the vein, the 'sharp' part of the needle is removed and a plastic tube is left in the vein. The plastic tube will be held in place with tape and bandages and a padded board placed to keep the closest joint still.

A child's veins are quite small and several veins may need to be tried to get the drip in place. Putting the drip in can hurt, but once the sharp part is removed the plastic tube does not cause pain. The area may however be uncomfortable.

If possible, blood tests are taken from the needle at the time of putting it in. At times not enough blood is able to be collected from the needle. If that happens, a separate blood test may need to be taken.

What happens after the drip is put in?

Long tubing or syringes can then be attached to the drip and fluids and medicines can be given. Often the long tubing will be put into a special (IV) pump on a drip stand that will control the amount of fluid that will go in. Most of the time the long tubing will stay connected and your child will need to take the drip pump and stand wherever they go. The nurses will explain and show you how to do this.

Your doctor will discuss with you how long the drip will need to stay in for. This will depend on why it is being put in, and how quickly your child gets better.

What problems can occur?

Drips can become blocked, leak or become infected. The nurses will need to regularly check the drip and the area around the drip (cannula). The nurses will look for redness, swelling, leakage and pain at the drip site. If any problems occur the drip may need to be put in again in another spot. At times a bruise may form when the needle is taken out of the vein, this will soon fade.

If you are worried please ask the nurses to check your child's drip.

the children's hospital at Westmead
The Sydney children's Hospitals Network

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What can I do to help?

Staying with your child while the drip is being put in can help comfort them. If you cannot stay with your child then a staff member will stay and comfort them instead.

If your child asks about the tests being done, reassure them and explain in simple terms what is being done and why. Always tell the truth.

It is helpful to distract your infant or child by cuddling, telling stories, singing or playing with a toy or game. You can help your child sit or lie down, which ever they prefer. Stay calm and comfort your child, if you get upset so will your child. Always praise your child afterwards.

The staff are there to help you and your child. If you would like more information please ask the nurse or doctor caring for your child.

Remember:

A drip is used to give your child fluid or medicines directly into a vein.

If you are worried please ask the nurses to check your child's drip.