An illustration of a clear plastic IV drip chamber with a green filter and a white scale on the right side. A grey tube with an orange connector is attached to the bottom.

**Your Child's Home  
Intravenous  
(IV) Antibiotic  
Treatment Plan**



**Patient name**

**Hospital number**

The doctor or nurse practitioner who has seen your child in the hospital is confident they are well enough to continue their treatment at home. This treatment will be provided by the children's community team (CCT) and the children's ambulatory care team (ACE). Both teams are run by specialist nurses who work closely with a senior children's doctor. A nurse will call you each morning to confirm a time to visit your child at home and which team will be delivering their care.

A specific information leaflet will also be given for your child's particular condition.

## **Why does my child need IV antibiotics?**

Your child has an infection that needs treatment. They are well enough to leave the hospital but still need to have antibiotics through a vein these are known as intravenous (IV) antibiotics.

**The infection that your child has is:**

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**The name of the antibiotic they will be having is:**

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**How will my child be given the antibiotic?**

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**Date the course of antibiotics will be reviewed?**

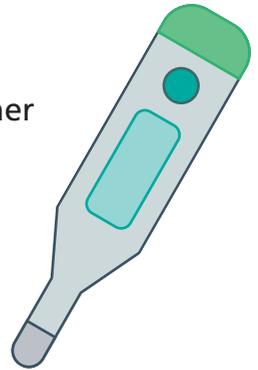
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There are a few devices used to give an antibiotic via the vein. The most common device is a cannula. A cannula is a small tube that is placed into a vein.

Other devices used are mid-line or central venous access device (CVAD). If your child is using this device it will have been discussed during your child's hospital stay.

## During each visit the nurse will:

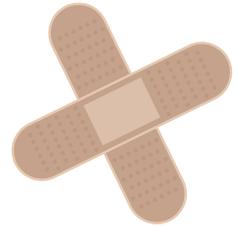
- Perform a set of observations and an assessment on your child.
- Inspect the IV site to look for any signs of inflammation.
- Give the prescribed antibiotic – this will either be by a slow push via a syringe or by a machine called a syringe driver or pump.
- Discuss with you how your child is managing at home and answer any questions you may have.
- Update you with any changes to your child's care plan.



## How you can help:

- If there is any redness, pain, bleeding or swelling at the cannula site please phone your child's nurse as soon as possible. It may be that the cannula site is irritated or no longer working.
- Don't get the cannula site wet. This may result in the dressing coming off and the cannula coming out.
- Try not to knock the cannula, this may be painful for you child and may cause the cannula to come out.
- If the cannula does come out apply pressure to the site with cotton wool or a tissue and then apply a plaster. Contact your child's nurse.

The nurse will give you a spare bandage, cotton wool and plaster in case it is needed. Please contact the team if you have any concerns.



## How to contact us:

### **Children's Community Team – 01274 365051**

We are available between the hours of 8.00am and 8.00pm Monday – Friday and 8.00am – 6.00pm Saturday and Sunday.

### **ACE Team – 01274 273354**

We are available between the hours of 8.30am and 8.30pm 7 days a week.

### **Children's Assessment Unit – 01274 382311**

We are available between the hours of 8.30pm and 8.30am 7 days a week.





**CALL  
999**

**Call 999 or go to the Emergency Department if your child has any of the following symptoms:**

- **Blue, pale or blotchy skin, lips or tongue.**
- **A rash that does not fade when you roll a glass over it, the same as meningitis.**
- **Difficulty breathing (you may notice grunting noise or their stomach sucking under their ribcage), breathlessness or breathing very fast.**
- **A weak high pitched cry that's not like their normal cry.**
- **Not responding like they normally do, or not interested in feeding or normal activities.**
- **Being sleepier than normal or difficult to wake.**
- **Acting confused, slurred speech or not making any sense.**

**For further information please visit the NHS website:  
<https://www.nhs.uk/conditions/sepsis/>**

**Please seek medical advice from the team if you have any concerns regarding the following:**

- Diarrhoea/vomiting
- Fever
- Reduced drinking/urinating
- Worsening symptoms
- Pain
- Not tolerating medication

## **Allergic Reaction**

There is a very small risk when having any antibiotic/ medication of an allergic reaction, below is a guide of what to look out for and what to do if this is to occur.

**Please scan the QR code for further information on Anaphylaxis and severe allergic reactions.**



If you would like this document in paper format then please ask a member of the team.

# Anaphylaxis

Anaphylaxis usually develops suddenly and gets worse very quickly.

The symptoms include:

- Feeling lightheaded or faint
- Breathing difficulties – such as fast, shallow breathing
- Wheezing
- A fast heartbeat
- Clammy skin
- Confusion and anxiety
- Collapsing or losing consciousness

**If any one of these signs above are present:**

- **Lie your child flat with legs raised (if breathing is difficult, allow child to sit)**
- **If the child has an EPI-Pen please administer**
- **Dial 999 for an ambulance and say ANAPHYLAXIS (“ANA-FIL-AX-IS”)**



## **People with hearing and speech difficulties**

You can contact us using the Relay UK app. Textphone users will need to dial 18001 ahead of the number to be contacted.

## **Accessible Information**

If you need this information in another format or language, please ask a member of staff.