

Communication/Interaction Through the Ages

Pediatric

To stand tall in pediatrics, you have to get down on your knees.”

▪ Dr. Armand Brodeur

- Bend down to the child’s eye level
- Use language they can understand

- Allow the child to have a security item
- Interact with the parents
- Never leave a child unattended

Age group

Communication/Interaction

Radiology

Neonatal



- Crying - Other meet physiologic and emotional needs
- React with natural reflexes

- Communicate with Nurse or with family

Birth to 1 year
(infants)



- Facial expressions
- Body movements
- Other nonverbal behaviors
- Vocalizations

- Hold in comfortable, familiar position
- Wrap child in a tight blanket
- Use steady, soothing voice
- Allow parent to be in the room when possible

1 to 3 years
(toddlers)

- Limited vocabulary; 2-3 word sentences
- Thinking is basically related to tangible events
- Cannot take the view point of another
 - “See, it doesn’t hurt Mommy”
- Will have a strong sense of separation anxiety without parents

- Use terms they know by asking the parent
 - To “urinate = “go pee pee”, “go potty”
- Allow parent to be in the room when possible
- Use steady, soothing voice
- Get down to their eye level

	<ul style="list-style-type: none"> • High level of curiosity • Short span of attention 	<ul style="list-style-type: none"> • Provide stickers or a chicken balloon • Keep things moving, no long breaks
<p>3 to 5 years (preschoolers)</p> 	<ul style="list-style-type: none"> • Not yet able to reason logically or understand cause and effect <ul style="list-style-type: none"> • Telling a 4 year old boy that he needs a procedure to see if he is sick is meaningless • Can verbally communicate how they feel <ul style="list-style-type: none"> • Sick , tummy hurts, arm hurts, etc • Involved with self-image <ul style="list-style-type: none"> • Form opinions they are sick because they were bad • Must see or hear something to understand • Must be actively involved to maintain short attention spans • Crying, kicking and squirming are still natural reactions to stress • Frequently ask , “Why” 	<ul style="list-style-type: none"> • Communicate at their level <ul style="list-style-type: none"> • Ask them their favorite TV show or movie and if you don’t know if ask them more about it • Use terms such as – “hold still like a statue”, “freeze, don’t move”, “hold your breath like you going under water”, “blow out the candles” etc • Motivate child with a reward – “You’ll get a sticker when you are done”, “I’ll show you your bones if you hold still” • Respect their modesty by keeping them covered with a sheet
<p>5 to 10 years (School Aged)</p> 	<ul style="list-style-type: none"> • Begin to think logically and to analyze situations • Can reflect and develop deeper understandings • Develop a special fear of bodily injury, disease, separation from loved ones, death, and punishment 	<ul style="list-style-type: none"> • Help them understand the need for the exam to accomplish diagnosis • Respect their modesty by keeping them covered with a sheet • Communicate at their level <ul style="list-style-type: none"> • Ask them what their favorite thing in school is • See what TV show or movies they are into

Adolescence

- Age 10-25 years
- Not a well-defined age group
- Begins earlier for girls than it does for boys
- Body awareness, and modesty becomes especially important
 - Avoid embarrassments
 - Ask unnecessary personnel to leave the room
- Same-sex peer groups have a dominant role

Age group

Communication/Interaction

Radiology

Middle Adolescents



- Bridging gap between peer group influence and early sexual relationships
- 1st real independence – often appreciate being treated as adults in conversation, preferences, and consultation about procedures

- Respect their modesty by keeping them covered with a sheet
- Speak to them as an adult, avoid childish terms
- Does not need a parent to stay in room during procedure, unless they want to have parent stay

Late Adolescents



- Focusing on mature relationships with both sexes
- May be financially independent
- Easily relate to adult conversation
- Should be treated as an adult, although limited experiences

- How do you wish to be communicated with???
- Respect their modesty by keeping them covered with a sheet

Young Adults
(25-45 years)

- Entering new roles of responsibility at home and in their work
- Often experience problem in handling their multitude of new roles

- How do you wish to be communicated with???



- May neglect one area while the concentrate on another
- Conversation and interaction should be on the same level as for other adults

- Respect their modesty by keeping them covered with a sheet

Middle-Aged Adults
(45-65 years)



- Found their place in life
- Relatively comfortable with their roles and success (or lack of it)
- Considerable stress if poor health or threat of poor health
 - Keeping a job and providing for a family, may outweigh personal health concerns
 - May delay seeking diagnosis or treatment

- Respect their modesty by keeping them covered with a sheet

Geriatrics



Cardinal rule when dealing with geriatric patients:

Patience & Respect

Table 11-1 (pg142)	Gerontologic Aging Categories	
Category	Chronologic	Functional
Young-old	Age 65-74 yr	Healthy and active
Old-old	Age 75-84 yr	Transitional
Oldest-old	Age 85 yr and older	Frail and infirmed

	<i>Communication/Interaction</i>	<i>Radiology</i>
	<ul style="list-style-type: none">• Some changes are normal for all older adults (primary aging):<ul style="list-style-type: none">○ Skin becomes more thin and fragile○ Mild loss of visual acuity○ Mild hearing loss, especially in the higher frequency range○ Senses of touch, taste and smell may decrease○ Lung capacity may diminish○ Limited bladder capacity in both women and men○ Reduction of bone mass, muscle strength and cartilage○ Posture and gait changes• Always treat older patients with respect and dignity• Treat them the way you would want someone to treat your grandparent!	<ul style="list-style-type: none">• Never rush an older patient!• Offer assistance if it appears needed• Use a soft pad on the table• Place a wedge sponge under the knees when appropriate• Reassure they will not fall if you see they are hesitant