

Now that your child has a shunt

Information for parents from the Pediatric Neurosurgery team

How do I take care of the incisions?

- The incisions are closed with stitches or staples and covered with a small sterile bandage. The neurosurgeon will decide when the bandage can be removed.
- You can wash your child's hair 5 days after the surgery. Use gentle water pressure over the incisions.
- The staples and non-dissolving stitches will be removed in 7 to 10 days. This will be done at your follow-up visit in the 2G Pediatric Neurosurgery Clinic.

How can I relieve my child's pain?

- Your child may have some pain at the incision site and along the shunt tract.
 - To relieve pain, you can give your child acetaminophen (Tylenol®) as needed, every 4 hours in the first few days.
 - If the pain increases, please call the Neurosurgical team. The telephone number is 905-521-2100, ext. 75237.
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What activities can my child do?

- Your child can resume normal activities as soon as he or she feels able.
- Your child should not swim for 2 weeks after the surgery.
- The Neurosurgeon will tell you when your child can return to school and take part in sports.

What follow-up will my child need?

- Before you leave the hospital after your child's surgery, make a follow-up appointment at the 2G Pediatric Neurosurgery Clinic. This visit should be within 2 weeks of leaving the hospital.
- Your child will continue to have routine follow up appointments until the age of 18.

**To make or change an appointment at the
2G Pediatric Neurology Clinic, please call
905-521-2100, ext. 75090**

When should I call the Neurosurgeon?

Shunts can break down or stop working properly (malfunction). It is important to watch for signs of problems with your child's shunt.

Signs of shunt malfunction for **babies and toddlers** are:

- 'sunsetting eyes', eyes that look downward
 - the soft spot, may bulge or feel tight
 - a big forehead
 - increased sleepiness
 - vomiting
 - not meeting developmental milestones
 - headache
 - increased irritability
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Signs of shunt malfunction for **older children** are:

- headache
- drowsiness
- nausea and/or vomiting
- clumsy or awkward movements
- lack of energy
- a change in thinking or concentration
- poor performance at school
- not meeting developmental milestones
- increased irritability

In the first few months after the shunt is put in, an infection could cause the shunt to stop working.

Watch for these signs of **infection**:

- Fever, a temperature of 38°C (100.4°F) or higher.
- Redness, swelling, or discharge from the incisions.
- Increasing pain.

If your child has any signs of shunt malfunction or infection, contact the Neurosurgical team and/or your family doctor.

To contact the Neurosurgical team, call 905-521-2100, ext. 75237

After hours, call hospital paging 905-521-5030 and ask to speak with the Pediatric Neurosurgeon on-call.

If the symptoms are severe, go to the nearest hospital emergency department or call 911.

What happens if there is a shunt malfunction?

If there are signs of a shunt malfunction, your child will have tests to see if the shunt is working. These tests may include Magnetic Resonance Imaging (MRI), a CT scan, an X-ray of the shunt or other tests.

If the shunt is not working, your child will need a surgical procedure. The type of procedure will depend on what caused the shunt malfunction.

If the shunt is broken or blocked, your child will need surgery to replace the shunt.

If the shunt malfunction is caused by infection, your child will have surgery to remove the shunt and put in an external drain. Your child will need to stay in the hospital and be treated with antibiotics. When the infection clears, your child will have another surgery to replace the shunt.