Infant Pulmonary Function Tests (IPFTs) are used to find out how much the breathing is impaired in children with lung problems. IPFTs are often done in patients with cystic fibrosis, asthma and neonatal lung problems.

The tests take 1 to 3 hours to complete. IPFTs are done while the child is sleeping with the help of mild sedation. Most of the time a medicine called chloral hydrate is given by mouth. It is used to produce sedation (a sleep-like state). As with any medicine, there is a risk of side effects. Chloral hydrate can cause both nausea and spitting up. To decrease the chance of side effects, your child will be weighed and will be given a dose of chloral hydrate that is right for his or her weight. Other types of sedation, including medicines given by IV, may be used if chloral hydrate is not the best choice for your child.

Most of the time an IPFT will be scheduled along with a High Resolution Computerized Tomography (HRCT) scan of the lungs. The HRCT is a special, 3-D x-ray that is used to help diagnose lung problems. It also will be done while your child is still asleep.

**HOW STAFF Prepares AN INFANT for THE TESTS**

The success of the tests depends greatly on how your child is prepared beforehand. The medicines help your child to sleep, but medicines alone will not make your child sleep soundly enough to do the tests without stirring. The tests are not painful, but may be annoying to a wakeful child. This is why your child must be sleep-deprived and kept awake for 4 hours before the test. It is important that infants do not have naps before the test, so the staff will keep your child from napping. A child’s sleep is much different than an adult’s. Five minutes of sleep for a child is like an hour for an adult, so please help the staff keep your child awake.

**THE DAY of THE TESTS**

1. Your infant will be awakened 4 hours before the chloral hydrate sedation is given.
2. The last feeding of formula will be given 6 hours before sedation.
3. Clear liquids will be given until 2 hours before sedation.
4. Your baby should have nothing at all by mouth for 2 hours before sedation.
5. Infants are dressed in clothes that have no metal snaps on the chest, back, or shoulders. (Snaps on the bottom are okay.)
6. Chloral hydrate will be given on the unit. Your child will be closely watched by the Neonatal Pulmonary Function Testing laboratory staff while being transported to the lab.
AFTER THE TESTS

1. Your child may be sleepy for 4 to 6 hours after the test.
2. Child will be watched closely by unit staff members for the rest of the day.
3. If your child is a toddler, he or she will be allowed to walk or crawl without supervision when it has been 6 hours since the end of the tests.
4. Your child may eat again when he or she is fully awake.
5. The results for the test will be ready in about 2 or 3 days. The doctor will discuss the tests with you after your child’s care team has had time to discuss the results.

If you have any questions please contact any of the Neonatal Pulmonary Function Testing laboratory staff members:

<table>
<thead>
<tr>
<th>Name</th>
<th>Phone</th>
<th>Pager</th>
</tr>
</thead>
<tbody>
<tr>
<td>Carrese Moody RN</td>
<td>355-3158</td>
<td>691-0352</td>
</tr>
<tr>
<td>Jackie Arend RRT</td>
<td>355-3469</td>
<td>690-0099</td>
</tr>
<tr>
<td>Courtney Cira RRT</td>
<td>355-3612</td>
<td>690-0514</td>
</tr>
</tbody>
</table>

Picture 1 Having a Pulmonary Function Test.

Medication given: ________________________________________________________________

Time: __________________________ Date: __________________________