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**Peds Path: A Journey from Home to the Hospital and Back Home:  
A Game to Orient Preschool Children to the Hospital Settings**

Leslie May

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**Peds Path: A Journey from Home to the Hospital and Back Home.**

**A Game to Orient Preschool Children to the Hospital Setting.**

**By**

**Leslie May**

**Mentor Robert Quinn**

**Submitted in partial fulfillment of the requirements for the degree  
of Master of Science in Education  
Bank Street College of Education  
1995**

*Abstract*

**Peds Path: A Journey from Home to Hospital and Back Home.**

**A Game to Orient Preschool Children to the Hospital Setting.**

**By**

**Leslie May**

With all of the cutbacks in the health care system children entering hospitals today have very few planned admissions, with an increasing large number of patients entering the hospital through the emergency room. As a result of this there are many children today who are entering the hospital with absolutely no preparation. This lack of preparation leads children to develop their own ideas and notions about just what the hospital experience will be like. These misconceptions or fears regarding illness or treatment may develop into incredible anxieties which often end up making the hospital experience much more difficult and scary than it has to be for children. According to research, preparation, and making the children familiar with the hospital and clearing up any misconceptions they may have will reduce their anxiety and make the hospital experience much easier and less scary for children.

Taking all of this into account I have created a game to help orient preschool children to the hospital experience. It is my hope that by playing this game children will learn about the hospital in such a way that is on their level and that is also fun and enjoyable for them. The idea is that by being familiar with the different areas they may encounter on the Pediatric floor, children will feel more in control and more comfortable about having to go to the hospital, thereby diminishing their psychological distress.

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## Introduction

"The unfamiliarity of the hospital setting has been identified as a factor contributing to the psychological upset of pediatric inpatients" (Thompson, 1986). Children who are entering the hospital today for surgery are no longer admitted the day before their operation, but instead are most often admitted the morning of the surgery. Also, many of the surgeries done are same day or ambulatory surgery where the child does not even stay in the hospital overnight. Due to all of this, there are many young children today who are entering the hospital with absolutely no preparation. They are unfamiliar with the hospital environment and therefore develop many preconceived ideas and notions about what the hospital experience will be like. These misconceptions or fears regarding illness or treatment may develop into incredible anxieties and fears which often end up making the experience in the hospital much more difficult and scary than it has to be for the children. If there was more preparation many of these fears would diminish. According to Thompson, "the research overwhelmingly supports the value of preparation in reducing the psychological upset of children" (1986). Thankfully, there are some hospitals that have preadmission teaching programs which familiarize the patient and family with hospital and medical procedures prior to the child's scheduled admission. However, there are some hospitals that do not have these programs so the children in these hospitals are the ones who suffer due to a lack of knowledge. Also, with all of the cutbacks in the health care system, there are very few planned admissions anymore. As I said above, most children end up being admitted to the hospital after an emergency or an unscheduled admission and therefore again have absolutely no preparation.

Due to all of these things discussed above, it becomes the responsibility of the hospital staff, as well as the parents who often also must be educated themselves, to educate and clear up any misconceptions the children may have about the hospital. This will not only ease the children's anxieties, but it will also make it much easier for the doctors to examine and treat their patients, because hopefully by being more informed they will be more relaxed. The idea is that the more children know, the more empowered and in control they feel about just what is going on with their own bodies. As Dr. Lorraine Stern points out in her article entitled "How to Help Your Child Cope with Medical Procedures," "The most frightening thing for any of us to face is the unknown. Research shows that children who were well prepared and supported before surgery and throughout a hospital experience recover almost twice as fast and with fewer complications than children who have no such preparation" (1992). Taking all of this into account I have decided to create a game which will help orient preschool children to the hospital experience. It is my hope that by playing this game, first facilitated by a therapist, and then later on their own with their peers, children will learn about the hospital in such a way that is on their level and that is also fun and enjoyable for them. The idea is that by knowing more about the actual physical layout of the hospital and the different areas they may encounter on the Pediatric floor, children will feel more in control and more comfortable about having to go to the hospital.

Play is the natural form of communication for young children. It is a means for them to express their feelings and emotions, as well as a way to make sense of this complex world in which we all dwell. Barbara Biber captures this idea very well in her article "Play as a Growth Process," when she says, "play serves two different growth needs in the early years--learning

about the world by playing about it and finding an outlet for complex and often conflicting emotions" (1966). The other important aspect of play is that it is pleasurable and fun. Because play is just that, fun, it allows children to express themselves and learn about things in a non-threatening manner. Because it is their natural form of communication, play helps give children the voice they need to get out all of their thoughts and fears. In the opening of his chapter on "Why Children Play" D.W. Winnicott says that "children play to master anxiety, or to master ideas and impulses that lead to anxiety if they are not in control" (1964). This idea sums up perfectly the importance of play when dealing with children in the hospital environment. They use play as a way of dealing with the many anxieties and fears they have due to their illness and resulting hospitalization. Play is a tool therapists can use to not only help children deal with their fears and emotions, but also to help prepare them for what they will be experiencing in the unfamiliar territory of the hospital. Because it is children's natural form of expression, they will feel most comfortable using it. Again, the more they know, the more they feel they are in control. "Through play, developmental and emotional effects of hospitalization can be restored. Play enables children to have control of their world and contribute to their resiliency and survival throughout hospitalization" (Loranger, 1992).

## Review of Literature

Being that the research has shown just how important it is to prepare children for their hospitalization and the different medical procedures which they will have to endure while they are in the hospital, there are many resources such as books and toys or games which have been created either by manufacturers or health care staff to help in this preparation. These products give children the opportunity to learn about the hospital and also to experience first hand what the different medical equipment looks like and feels like. It gives children the chance to use these materials to represent what it is they are going to experience for real.

In researching just what is out there to help in the preparation and familiarization of the hospital experience I found that there are a great number of different books to read to and with children of all ages, as well as a number of things which will help orient children to the medical equipment and procedures they will encounter while in the hospital, including play doctor's kits, hospital equipment lotto and other such coloring and activity books on the subject. What seems to be lacking most is any sort of games or materials which help in orienting children to the physical setting of the hospital and all of the different rooms and places they will encounter while they are in the hospital. The one game that is available, although I have not seen it first hand, is entitled Hospital Game, created by Elizabeth Crocker when she was a child life director. This is a board game geared to school-age children where they use Doctor and Patient cards. Using these cards players collect experience points or Overnight Stay cards to win the game, while in the process learning about the hospital. Although this is a good game and can be adapted to be used with preschool children, from my research I learned



that there were no games around which are geared specifically to preschool children to orient them to the hospital. Although they can learn through books read to them and experiencing the medical equipment for themselves, I thought how wonderful a game designed specifically for the orientation of preschool children to the physical environment of the hospital would be. It would be both an educational and fun way for them to learn accurate information, while at the same time keeping focus on their developmental needs of developing cooperative play skills, as well as learning color recognition and the importance of taking turns and sharing with others. My aim was to create a game which would focus on all of these things. Aside from medical puppets of doctors and nurses, doctors kits, anatomically correct dolls, as well as the lotto games mentioned above there really is nothing out there geared to the specific needs of the preschool child.

## Development of Preschool Age Child

In thinking about the creation of this game I decided to gear it towards the preschool age child, because from what I have seen and read, I think that it is these children who are most vulnerable in terms of how their hospitalization ultimately affects them. In their article, "The Effects of Hospitalization on Children's Behavior: A Review of the Literature," Johanna King and Suzanne Ziegler discuss the findings on the effects of hospitalization on children and one of their conclusions was that hospitalization does have negative effects on children and that these effects seem to be greatest for children between the ages of seven months and five years (1981). The game I have created is geared to children right in the middle of that group.

The preschool age child is most vulnerable to the hospital experience for two main reasons. The first being that of their inability to separate fantasy from reality. Children at this age have the tendency to conjure images up in their minds of what things will be like, making it very difficult for them to change these ideas. According to the well-known psychologist John Piaget, there are four major stages of development in children's thinking. Piaget's second stage of development, the pre-operational thought stage covers the preschool child in that children are in this stage from age two through age six. During this stage children are extremely egocentric and have a very difficult time thinking about things in any way that does not relate to them. They tend to think very concretely and therefore can only think about things in terms of their own experiences.

Knowing all of this it is imperative that children of this age are prepared in a concrete way to just what the hospital environment is really

like. What happens when they are not prepared is they use their so called magical thinking to think about what the hospital will be like. The risk with this is that through all the television, movies, and simply listening to what others say, these children can get the wrong idea about the hospital, conjuring up extremely scary images in their head. Also, being so egocentric, these children must experience first hand what they are going to see and experience in terms of themselves so that they can think about it in a very real way.

My hope is that this game will help to do just that. By preparing these children with the reality of what the hospital experience is really like, they will be better able to adjust and cope successfully. Using actual pictures of the rooms and places encountered, and also having them be the actual patients, these preschool age children will be able to think about and relate to the hospital experience by themselves in a way that is based in reality rather than fantasy.

The second factor which makes preschool age children so vulnerable to the effects of hospitalization has to do with the issue of separation and their overwhelming sense of abandonment when they enter the hospital. As Thompson pointed out in his article, "Where We Stand: Twenty Years of Research on Pediatric Hospitalization and Health Care," "separation was pointed out as a major factor contributing to the immediate and posthospital psychosocial upset of preschool children" (1986). It is so important to help children deal with this issue in the easiest and most concrete way possible so that they can learn and understand that their being in the hospital does not mean that their parents or caregivers are abandoning them, but instead are trying to help them get well so they don't have to leave home again.

A large part of what children fear about going to the hospital has to do with the fact that they do not want to be alone. What my aim is with my

game is that children will get to know all of the different rooms and people who are there for them while they are in the hospital, including discussing the fact that in most hospitals today in their room, children's caregivers are allowed to room-in, meaning they can sleep in the room with the children. It was pointed out that this policy of rooming-in really cuts down on separation anxiety" (Loranger, 1992). Therefore, it is very important that children learn about the possibility of rooming-in early on so that their fears of abandonment and separation do not end up taking over and getting the best of them. Once again, the more the children are informed, the more empowered and in control they will feel. By seeing this children will see that they will be surrounded by people who care about them including, if they are able even their own caregivers.

This issue of separation anxiety and fear of abandonment is a very real and important issue for young children to deal with successfully. John Bowlby who has done a lot of work concerning this issue argues that, "the quality of children's experience with attachment figures and their ability to aide them cope with danger and distress set the stage for later development life cycle tasks of developing relationships" (Loranger 1992). For this reason alone it is absolutely imperative that we do all we can to help hospitalized children deal with this issue of separation anxiety successfully so that not only will we be helping to reassure them that they indeed are not alone, but also to help keep their normal developmental issues and tasks on track even while they are dealing with a disruption in their normal development by having to be hospitalized in the first place. As Mary Cerreto said in her article entitled, "Developmental Issues in Chronic Illness," "Developmental tasks must be attained by children if they are to be judged, and to judge themselves, reasonably happy and successful individuals" (1986).

One of the most important things to accomplish for children who are in the hospital is that of helping to normalize their hospital experience for them. One of the most substantial ways of doing this is by helping them keep up with and achieve their normal developmental tasks. Although as I mentioned above, the preschool age child is still extremely egocentric, she is also just beginning to learn to play with other children. She is learning what cooperative play is and what it is to socialize with other children. Allowing children the opportunity to play with other children while they are in the hospital is a very important way to help them to continue to work on their development and also to normalize their experience in the hospital.

Through games and other such play activities children are able to learn what it means to socialize and share with other children. "While playing, children practice language, communication, and interpersonal skills and learn to cooperate, share, and compete with others (Lee and Fowler, 1986). These are the essential developmental tasks that preschool age children must accomplish in order to continue successfully in their overall development.

Through my game children will be able to experience what it's like to do all of these things, while at the same time learning in their own language of play what the hospital experience is all about. Play is children's natural language and for children of this age it is a normal part of their day to day world. Having to go to the hospital has turned these children's world upside down. By giving them the opportunity to play we are giving them back some of that normalcy, thereby helping them to begin to socialize and accomplish those crucial developmental tasks

## Explanation of the Game

I have created a game to help orient preschool children to the inpatient hospital setting. As I said at the beginning of this paper, research has shown that preparation and being informed about the hospitalization experience, helps children cope better with the hospitalization and their illness. We know that through play children are able to work through their concerns and fears, as well as learn about the hospital through their natural language which is that of play. As Joy Goldberger said in her article entitled, "Issue-Specific Play with Infants and Toddlers in Hospitals: Rationale and Intervention," "play that is preventive aims at creating as normal and optimizing an environment as the hospital allows" (1988). In keeping with all of this, and the fact that preschool age children are most vulnerable, I chose to create a fun game which would help orient and prepare these children for the hospital environment.

The game is called **Peds Path: A Hospital Journey From Home to Hospital and Back Home**. It is geared towards children from age 3 years old to 6 years old and is for anywhere from 2 to 4 players. As it is designed now, the game should be played with a therapist so that he can facilitate the discussion of what occurs at the different sites the patients encounter, clarify misconceptions, and provide coping strategies, while on their hospital journey. The game consists of 4 patient player figures, the gameboard, and the color and special room playing cards. The start of the game is the Emergency Room space. Before starting the game you mix up the playing cards and then place them in the designated space on the gameboard. The youngest child goes first and then play proceeds to the left from that child. The first child picks a card and then moves her patient piece to the color or

special space designated by the card. There are three different types of cards. When you pick a **single color card**, you simply move your playing figure to the closest corresponding color space on the path. When you pick a **double color card**, you move your figure to the first and then the second closest corresponding color space on the path. When you pick a **special room card**, you look on the board to find where on the path that particular room is and then move your figure to that corresponding space on the board. The game follows with each child picking cards and moving their patient figures around the board. The first player to reach the end of the path and the space marked Home is the winner of the game. To win the player must reach the end of the path exactly. This means that they must end by picking the final color space on the path. If the child gets to the end and picks a color card that is no longer in front of them on the path she must simply not move and wait to try for the card she needs at the next turn, doing so until she reaches the very end. If a child picks a **special room card**, of a room she has already passed on the board she still must move her figure backwards on the path and go to that room space.

The color card spaces were chosen to be used as the spaces along the path because of the goal of trying to help keep children up to their normal developmental tasks. The learning of the different colors is something which occurs at the preschool age. While they are in the hospital it is nice for the children to have the opportunity to continue to work on learning their colors. For those children who have been working on their colors, it is very normalizing for them to continue to do so while they are in the hospital. For those who have not begun to work on their colors, helping them begin to do so while they are in the hospital is a good way to begin. What is also nice

about using the colors cards is that they are bright and cheery and therefore a nice mix with the different hospital spaces.

There are eight different special room spaces on the board. The start of the game is the Emergency Room space. There is no card corresponding to this space because all of the players start here. The reason the Emergency Room has been chosen as the starting space for all of the players is because in the hospital I have done my work in and from which this game has arisen, according to Child Life Coordinator Robert Quinn, in 1994 approximately 90% or 1800 children entered the hospital through the Emergency Room.

The next two spaces on the board are the Playroom and the Patient Room. While we are playing the game the important thing for the therapist to make the children aware of is that these two rooms are 'safety zones' for the patients. This means that when they are in these rooms they will not be prodded at, poked at, or picked on. For the most part no medical procedures will take place in these rooms. However, there are times when procedures may have to be performed at bedside of the patient's room. This occurs when the treatment room is occupied or when the child has specific medical restrictions and is restricted to her room due to being on isolation or in traction. No procedures ever take place in the Playroom. Because often this game will be being played in the Playroom most children will already be familiar with this room, however, if for some reason they are not the therapist and the children can have a whole discussion on all of the different exciting things they can do while they are in the playroom, with emphasis on the fact that when they are in this room they have the freedom to choose what they want to do and simply have fun without any health professionals bothering them.



When a child gets to the Patient Room space, the facilitator can discuss with the children that this is their room and that they can let everyone who enters know that they should knock before entering and give the children the privacy and respect which they are entitled to. The facilitator can also talk to the children about the call button that they have next to the bed so that they can contact the nurse at any time day or night. This is very important to point out because it again addresses the issue of separation and shows children that they are never completely alone when they are in the hospital.

The next space is the Treatment Room. It is important to discuss all the different kinds of procedures which go on in this room when the children land on this space. This is a good opportunity for the facilitator to steer the conversation to the different kinds of feelings and fears the children might be having because of what goes in the room. It is also a good time to point out the different things the children can do while they are going through the procedures to make them easier and move their attention away from the pain they may experience. This includes different stories or images the children can think about, bringing in with them their favorite toy or stuffed animal, or even squeezing their caregiver's hand.

The School Room is the next space. This is good to point out because the School Room serves the children all the way from kindergarten up through to the twelfth grade so some of the preschool children will be going there. By pointing it out and showing the children that it is one of the prime places in the hospital they will see again that indeed normal things do go on while they are in the hospital. They will learn that just because they are in the hospital does not mean they will miss out on their day to day routine, or if they are in school, fall behind because there is one in the hospital too. Again seeing the School Room is very normalizing for the children.

The next room is the Family Room and this is important for the children to see because it helps address a lot of their prime issues such as that of separation and being away from their family. When the children land on this space the facilitator can talk to them about the fact that this room is open all the time for their families and that even their siblings can visit them. They can also discuss how if the parents do not choose to stay in the room they can stay as long as they like in the Family Room. Discussing all of this with the children helps them to see that just because they are in the hospital does not mean that they will be separated from their family and left alone. Making the children feel secure about this is very important because of the very real and primary issue they have with the prospect of separation and the uneasy feelings this issue stirs in them. Making them feel more secure in terms of this issue helps to make them feel more secure with the hospital experience as a whole, thereby making them have an easier time while in the hospital

The Nurses Station is the next space on the board. Discussion of this space is very important because it shows the children that they will never be alone while at the hospital because no matter what there is always someone at the Nurses Station they can call on if they need anything, whether it be because they are in pain, their IV is beeping, or even because they are scared and simply need a hand to hold or a hug. This room helps the children address and discuss their issues of abandonment and fears of being alone, reassuring them that while they are in the hospital there will always be someone there for them.

The final space on the board, aside from the finish which is Home, is the Pediatric Special Care Unit. Many of the children playing the game will never enter that room, but many others will. Because of this and the fact that

it is such a big space in the actual pediatric unit, it is important that children learn about what it is and what goes on there so that they are not scared because of the unfamiliarity of it. Again, this all goes back to the main idea behind the game. The more these children are prepared and familiar with the hospital as a whole and all they will encounter while they are there, the better experience they will have, and the less fears they will have to endure due to the unknown. The more these children know, the more empowered and in control they will ultimately feel.

As I have stressed throughout this paper, I believe that orienting children who have to go to the hospital to the inpatient pediatric unit is incredibly important. Doing this before the child's actual admission to the hospital would be the best time for this to occur, but unfortunately in most cases today this is virtually impossible. Whether it be an unplanned admission as so many often are, or the fact that the caregiver's themselves know very little about what the children will encounter while they are in the hospital, for the most part the children end up entering the hospital with little if any preparation. It then becomes up to the hospital staff to do all they can to orient and prepare the child and family for what they are going to experience while they are in the hospital. I believe that this game which I have just described will do just that.

The other important thing which it is my goal this game will accomplish is to help clarify any misconceptions the children may have about the hospital setting. As I discussed above, preschool age children have very imaginative minds and tend to engage in a great deal of magical thinking. As a result they often end up conjuring up in their minds their own unique ideas about just what the hospital holds in store for them. Unfortunately these ideas are often very distorted because they are based on television,

movies, and bits and pieces of conversations they hear and discuss with friends. It is my intention and hope that this game will dispel these misconceptions and give the children a clear and more reassuring picture of what being in the hospital is all about. Seeing the different places in the hospital and discussing them first hand with the facilitator of the game will show the children what each room is like and what really goes on in all of the different places on the inpatient pediatric unit.

## Applications of the Game

As I have mentioned many times above, I have designed this game so that it is facilitated by a therapist. I believe that this is very important because it is the therapist who is the one to initiate the conversation about the different places on the board so that the children learn all about them. The game is presently designed for preschool age children and because these children are still too young to be able to read there cannot be any cards to read which will go with the special space cards to help explain about each room. Therefore, it is up to therapist to initiate the conversation when the children land on each space, thereby familiarizing them and discussing with them the important facts about each place. The therapist facilitates the dialogue through questions such as; Who knows what kinds of things happen in the specific room? Have any of you ever been in the hospital before and been in the specific place you are talking about? If so how did you feel being there and can you tell us about it? What kinds of things do you think about this room which makes you feel scared or sad, or any other such feeling? These questions, as well as many others will help the children and the facilitator have a truthful discussion in the children's own language about all that happens in the different places around the inpatient unit. Using their own language will allow the children to really understand just what the hospital is all about, once again making them feel just a little more confident and a little more in control.

I think that once the children have played the game several times on their own and have gotten not only the fun but the educational value out of the game as well, they will be able to play it on their own without the facilitator present. I think if they request to play the game after they have

played it, it shows that they not only enjoy the game, but also feel comfortable enough with it to want to play it and talk about the hospital with their friends. This is important because it helps children develop peer support and relations which is so fundamental at this age. The more they play the game and talk about the hospital, the more they feel comfortable with being there. Also I think there is a lot to be said for the fact that the children would choose to play a game about the hospital on their own. The mere fact that they would choose the game on their own shows that they are beginning to see the hospital not as something so scary, but instead a more normal environment. So, although I initially designed this game to be used educationally with a facilitator, I think if chosen it can be used with children on their own purely for fun. Playing the game for fun is also a very good way to help familiarize and educate children about the hospital. After all as I have said many times, play is children's natural language.

Although I originally designed this game for preschool age children, I think that with a few alterations it can be modified to be used with older school age children. Adding descriptive game cards with thought provoking questions to accompany the special space cards would provide opportunities for discussion, education, and peer relations and support. Examples of such questions are; Why do you think the call button in the Patient Room is so important?, What do you do when your in the treatment room to make yourself feel better?, and Can you discuss with each other the feelings you have about being sick?

In summary, up until now I have only spoken about the use of this game in the hospital setting. However, I think that in the long run it could definitely be used in both homes and schools to orient other children about the hospital environment. Eventually I think a general guide could be

written up so that parents, caregivers, and teachers could facilitate this game in their homes and classrooms. I think this game would be a wonderful way for preschool children to learn about the hospital in their preschool classroom among all of their peers. I think it would be wonderful to use to orient all children because it would help them become prepared and familiar with the hospital in the case of any of the children ever having to go to the hospital. Also, if there is a child in the class who is in the hospital, it is important for the other children to learn about what she might be experiencing so that when the child does return to school the children can talk openly to her about her experience. Being in the hospital is something which is different and goes against the norm. Many children have a tendency to fear the unknown and in defense make fun of what is different. By making the other children in the class aware and informed, there is a good chance they will react favorably to the child when he returns to school, instead of teasing him and making him feel bad.

If a child in the hospital has other siblings at home, again this game could be used to help the sibling really understand where his brother or sister is and what he or she is going through. Also if the child is to be in the hospital a long time, or even a short time for that matter, the sibling will often come to visit. Just like the child who is in the hospital was scared and apprehensive about going, so too is the sibling. Just like making the patient more informed and prepared makes him feel better and in control, so too will it do this for the sibling. My aim and hope is this game will be able to help all children become more prepared and informed about the hospital experience.

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Appendix A 22

ST. LUKE'S-ROOSEVELT HOSPITAL CENTER  
PUBLIC RELATIONS DEPARTMENT

CONSENT FOR PHOTOGRAPHS/INTERVIEW

Patient's Name: Robert Quinn Room No. \_\_\_\_\_

I hereby grant permission to have photographs or recordings taken of me or Robert Quinn by St. Luke's-Roosevelt Hospital Center or its authorized agent and I consent to their use in whatever way St. Luke's-Roosevelt Hospital Center may see fit. I release St. Luke's-Roosevelt Hospital Center, and/or its authorized agent, from any responsibility for such use thereof.

Signed: Robert L. Quinn

Parent or Legal Guardian: \_\_\_\_\_

Witnessed: Justo May

Date: 6/30/95

## **Instructions to Peds Path**

### **A Journey From Home to the Hospital and Back Home.**

Welcome to Peds Path. We are going to take you on a journey from the Emergency Room Through to the Pediatric Floor and then back to your home again. Along the way you will have the chance to see all of the different places you will encounter while you are in the hospital. We are going to show you that the hospital is really not as scary a place as it may seem to you right now. We'll show you that while you are in the hospital you will even get to places where you can have fun. We hope this game helps you to see that the hospital is not as bad a place as it may seem. **GOOD LUCK!**

To play the game all you have to do is use the game cards to move your person to the same colors or place spaces you pick from the pile of playing cards. If you are the first person to move your person from the Emergency Room to the end of the journey, Home, you win the game.

**For 2 to 4 Players - Ages 3 to 6**

#### **CONTENTS**

1 gameboard  
4 patient playing figures  
color playing cards  
7 special room playing cards

#### **OBJECT**

Be the first player to reach Home.

#### **SETTING UP THE GAME**

1. Open gameboard and place it on a flat surface.
2. Shuffle game cards and place them on empty space on gameboard.
3. Take all chosen patient playing figures and place them on the Emergency Room starting space.

## **PLAYING THE GAME**

\*Make sure facilitator is present when children play this game for the first time. The facilitator will instigate the conversation, helping the children understand just what goes on in each room they encounter.

1. The youngest child playing will go first. After that the child to the left takes his or her turn and then playing continues to the left.
2. On his turn each child will pick a card from the pile and then move to the first space corresponding to the picture on the card.

Playing cards: One color block - These cards have one color picture so when picked the child will move to the first space with that color.

Two color blocks - These cards have two color pictures. When picked child will move to the first and then the second space with the same color.

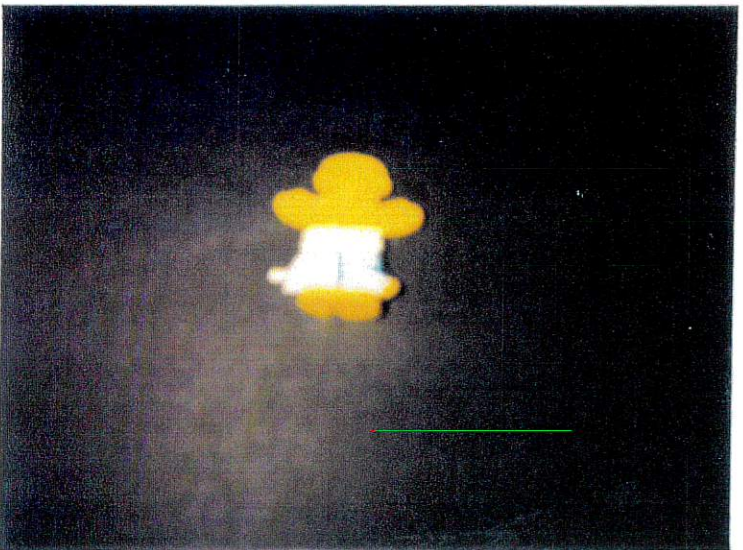
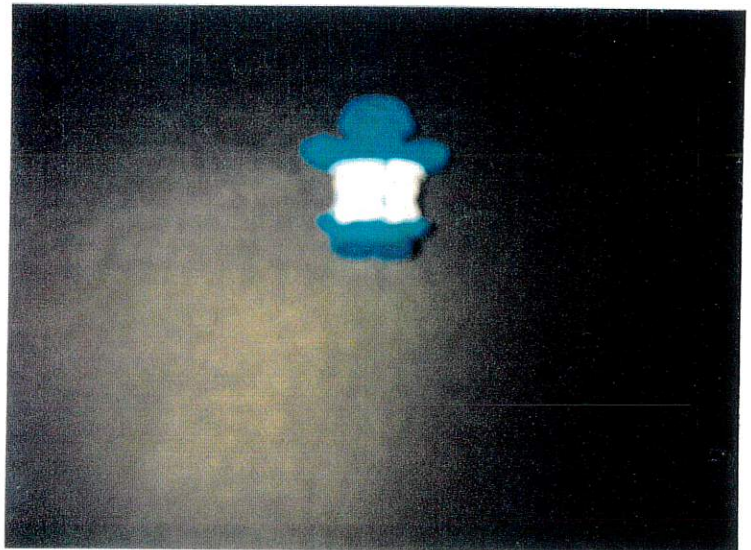
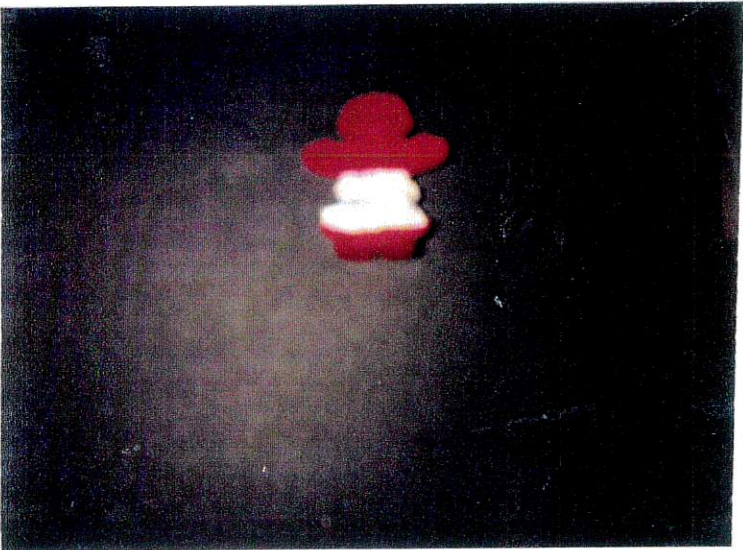
Special Room cards - These cards have pictures of special rooms along the path. when picked the child either moves forward or even backward to that special room. For example if you choose a card with a picture of the **Schoolroom** move your patient piece to the **Schoolroom** space on the gameboard.

3. Always move your piece in the direction towards **Home**, unless a chosen picture piece is behind where your patient is at the time. If this is the case move patient piece to designated space on the board.
4. If you pick a card and end up landing on the same space as another patient, you may both stay on that space together. You do not send the other player back to home.

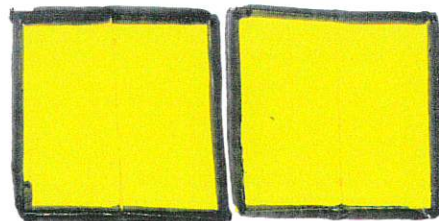
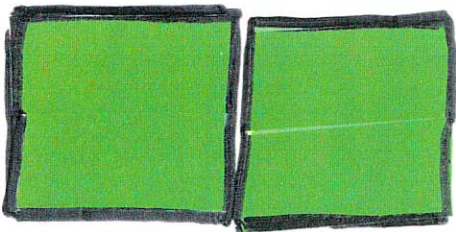
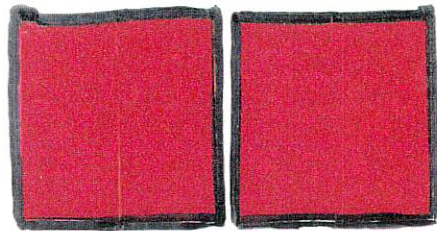
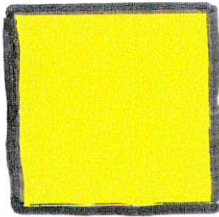
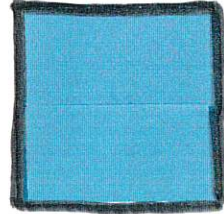
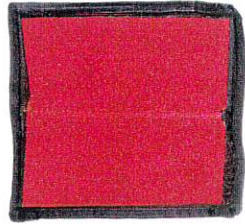
## **TO WIN THE GAME**

If you are the first player to reach the last blue space marked **Home** you have won the game. One thing, you must reach the blue space exactly. If you come to the end and pick a card which is no longer ahead on the path you simply cannot move and must remain on the path not moving until you pick a blue card.

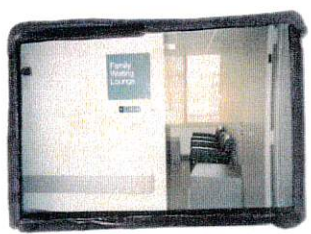
# Game Player Figures

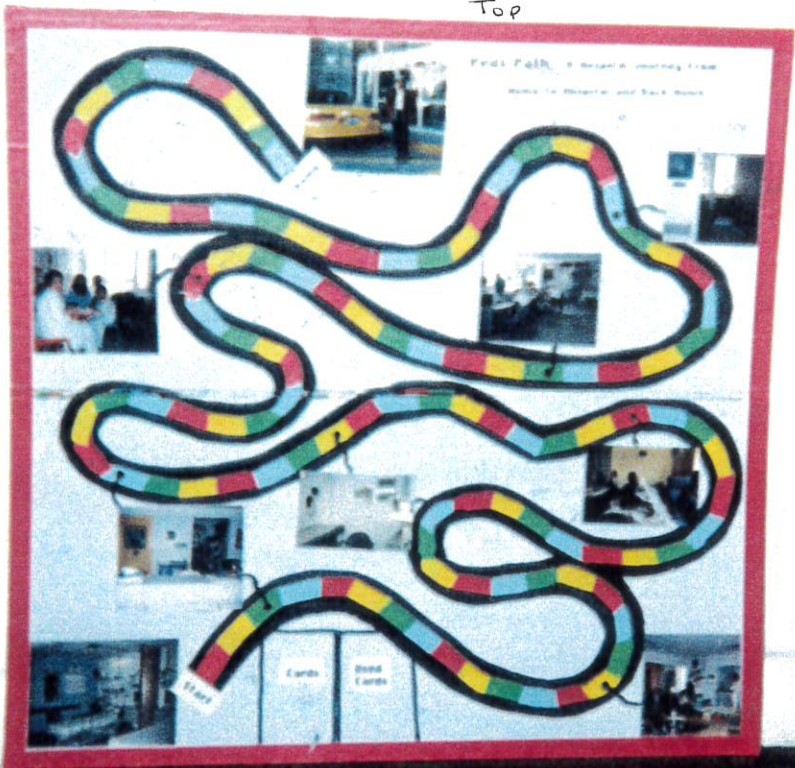


# Game Color Cards



# Game Special Room Cards





GameBoard

Appendix F