Introduction
Insertion of pediatric IV’s is a procedure that can produce anxiety in patients, families, and healthcare providers. The proper use of procedural pain management in pediatric IV starts can significantly reduce or eliminate the pain associated with the procedure and as a result decrease anxiety related to the procedure and increase family and patient satisfaction.

Method
•Patients (age 1-18 years) presenting to the Pediatric ER between August 1 and September 30, 2014 were randomly selected for study inclusion.
•Following IV insertion, the patient’s nurse completed a survey (Figure 1) regarding pharmacological and nonpharmacological pain management techniques utilized, patient’s pain score, and patient and parent’s satisfaction with the techniques utilized.
•Pharmacological Interventions: Needle-free injector with buffered lidocaine (Image 1), lidocaine cream (LMX) (Image 2), vapocoolant spray (Image 3)
•Nonpharmacological: comfort positioning, distraction (Image 4)

Results
There was no control group as all patients were offered a pain management option. On a scale of 0-10 either using the FACES, FLACC or numeric scale the average pain level was calculated. Patient satisfaction on a scale of 0-10 (0 not satisfied and 10 completely satisfied) and parent satisfaction was also calculated.

Conclusions
The use of pharmacological pain management along with nonpharmacological pain management should be a standard for IV starts with any pediatric patient. The use of these methods not only decreases pain but also increases patient and family satisfaction with the procedure.