

Guidelines for Pediatric Surgery

Norton Women's & Children's Hospital- St. Matthews

Revised Oct. 2022

NWCH is designed to provide surgical and anesthesia services to pediatric outpatients and inpatients that do not require post-operative intensive care. You may reach an Anesthesiologist that will be providing care at NWC at 502-559-1500 to discuss the care your patient may need or answer any questions.

Patients who are ASA I, II, and III (III with Anesthesiologist approval) are eligible to receive anesthesia services at NWCH. Patients who are ASA IV are not eligible for NWCH. These criteria apply to both scheduled elective cases and emergency add-on cases.

The definitions for the American Society of Anesthesiologists Physical Status Classifications are as follows:

ASA I

Normal healthy patient for an elective procedure. ASA I patient has no organic, physiologic, biochemical, or psychiatric disturbance.

ASA II

A patient with mild systemic disease.

ASA III (eligible with Anesthesiologist approval)

A patient with severe systemic disease

ASA IV (not eligible – aside from NICU infants)

A patient with severe systemic disease that is a constant threat to life

The following conditions have been agreed upon as general guidelines, though individual cases may vary based on clinical presentation and provider discussion.

The following are not typically eligible:

- Children less than 2 years (24 months) of age for tonsillectomy
 - Children > 24 months ARE eligible for tonsillectomy, but if <36 months old will require post-operative admission¹
 - NOT eligible for tonsillectomy at NWC
 - obesity (BMI >95th percentile for age; see BMI calculator²)
 - Down syndrome
 - craniofacial abnormalities
 - neuromuscular disorders (ex. CP)
 - sickle cell disease
 - bleeding diatheses
 - mucopolysaccharidoses
- Severe sleep apnea = apnea-hypopnea index ≥10 obstructive events/hour, oxygen saturation nadir <80%, or both
- Poorly controlled asthma
- Known or suspected difficult airway
- Significant risk of postoperative airway and respiratory problems
- Severe obesity:
 - Less than 12 years old: BMI > 99th percentile²
 - 12 years and older: BMI > 40
 - T&A/airway procedures: BMI >95th percentile² (all ages)
- Insulin dependent diabetes mellitus
- Patients currently on CPAP, BiPAP, ventilator (with the exception of NICU patients)
 - Patients on oxygen alone may be eligible after Anesthesiologist consult.
- Personal or family history of malignant hyperthermia (MH)
- Possible MH susceptibility including patients with muscular dystrophy, progressive weakness, patients scheduled for muscle biopsy
- Patients with dystrophic epidermolysis bullosa, Williams Syndrome, Hunter Syndrome, Hurler Syndrome, sickle cell anemia, any progressive neurologic or muscular disease
- Cardiac patients with:
 - Congenital heart disease (complex or unrepaired)
 - Prolonged QT syndrome
 - Arrhythmias, pacemaker or AICD
 - Cardiomyopathy
 - Pulmonary hypertension
 - Heart transplant

1. This is based on The American Academy of Otolaryngology- Head and Neck Surgery's 2019 "Clinical Practice Guideline: Tonsillectomy in Children."
2. BMI percentiles can be calculated by entering a child's height and weight into a calculator at <https://www.cdc.gov/healthyweight/bmi/calculator.html>.
3. Adenoidectomy alone (without tonsillectomy)- If child is <2 years of age and has OSA, may require admission.¹

Patients who have a simple repaired congenital heart defect, appropriate cardiology follow-up, normal cardiac function, and are on no cardiac medications, may be eligible for care at NWCH.

Patients with essential HTN, well-controlled on a single medication and no systemic effects (ie. renal dysfunction/diabetes), are eligible for care at NWCH. BP medication must be appropriately held prior to surgery.

Patients with bleeding disorders may be eligible for minimal procedures (ex. IUD placement) at NWCH. Must have heme/onc orders and clearance. If post-op admission required by heme/onc, downtown location is recommended due to heme/onc specialty availability.

There is no minimal age for NWC. However, the following criteria will determine discharge eligibility:

- If term infants, must be ≥ 48 weeks post-conceptual age (Post-conceptual age = number of weeks at birth + number of weeks since birth).
- If former premature infants (less than 37 weeks at birth), must be ≥ 60 weeks post-conceptual age
- If patient does not meet the above age criteria, they require admission overnight.
- All infants < 6 months old meeting the above discharge criteria require 2 hours post-operative monitoring prior to discharge.