SECTION 1

GENERAL GUIDELINES

POLICY 1.4.1	APPROVED PAEDIATRIC PROCEDURES AT CHATSWOOD PRIVATE HOSPITAL
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AIM/OUTCOME: To provide a patient focused quality healthcare service. The facility strives to deliver

the highest level of clinical care in a culture and environment of improving

performance and best practice.

POLICY REFERS TO: Accredited Medical Practitioners

Clinical Nursing Staff Administration Staff

To be read in conjunction with Clinical Manual Policy 1.4 'Approved Adult Procedures'. **POLICY:**

All procedures performed in the facility are approved by the Medical Advisory & Audit Committee (MAAC) and are suitable to be performed in a facility licensed to perform surgical procedures under all types of anaesthesia.

All procedures are classified as suitable for day surgery because they meet the criteria of :

- Minimal risk of post operative haemorrhage,
- Minimal risk of post operative air way compromise
- Controllable post operative pain with outpatient management techniques,
- No special post operative nursing requirements that cannot be meet by community nursing
- Rapid return to normal fluid and food intake.
- All necessary facilities and equipment is available prior to a procedure being undertaken.

A surgeon wishing to perform a new procedure that does not appear on this list has to apply to the MAAC for approval as per L&M Policy 2.11 'Application for Privileges to Perform New Procedures or Technology' which is located in the Leadership and Management Policy Manual.

The MAAC has determined that children may be admitted 12 months to 14 years of age with a maximum of 29 paediatric patients admitted to the facility at any one time. Paediatric patients may be admitted for a maximum of 8 hours as a day surgery case or 23 hours if admitted for overnight care.

- Children less than 12 months of age may be admitted following risk assessment and clearance of the surgeon, anaesthetist and nursing staff.
- The MAAC does not endorse the admission of children under the age of 3
 years for Tonsillectomy procedures. Children under 3 years of age may
 only be admitted following risk assessment and clearance of the surgeon,
 anaesthetist and nursing staff.
- Patients under two years of age or under 10kg with diagnosed sleep apnoea (as per sleep studies) are not to be admitted to CPH

To minimise the risk associated with paediatric procedures, all procedures are elective and are performed on well children.

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A DETAILED LIST OF THE APPROVED PAEDIATRIC PROCEDURES PERFORMED: LENS PROCEDURES: [MBS ITEM NUMBERS INCLUDED]

- Artificial lens, insertion / removal / replacement / repositioning [42709, 42702, 42701, 42719]
- Capsulectomy or removal of vitreous via the anterior chamber [42719]
- Lens extraction [42707, 42716]

CORNEAL PROCEDURES:

Correction of astigmatism [42672]

OCULAR PLASTICS

- Auto conjunctival transplant or mucous membrane graft [42641, 42665]
- Canthoplasty procedures [42590]
- Ptosis Repair [45623, 45624]
- Eyelid Reconstruction [45614]
- Conjunctival procedures including transplants [42677]
- Conjunctivo rhinostomy including dacryocystorhinostomy procedures [42623, 42626]
- Dermoid cyst / orbital cyst [42574]
- Ectropion or entropion, tarsal cauterisation [42626, 45626, 42866]
- Eyeball, perforating wound of; Orbit exploration [42515, 42557, 42533, 42510]
- Lacrimal procedures [42611]
- Nasolacrimal tube insertion [42599, 42611]
- Ophthalmological examination under general anaesthesia [42503]
- Punctum procedures [42617]
- Removal of foreign body [42542] [42569]
- Strabismus [42833], [42836], [42839], [42842]
- Tarsal cartilage excision [42575]
- Tarsal cyst [42575]
- Trichiasis treatment [42587]

EAR NOSE & THROAT

- Middle ear, insertion of tube for drainage [41632]
- Nasal septum, septoplasty, submuccous resection or closure [41671]
- Nasal septum, reconstruction [41672]
- Turbinates, submucous resection of, unilateral (Anaes) [41692]
- Tonsils or tonsils and adenoids, removal of, in a person aged 12 and over [41789]
- Tonsils or tonsils and adenoids, removal of, in a person aged under 12 [41793]
- Adenoidectomy [41801]
- Myringoplasty, trans-canal approach (Rosen incision) [41527]
- Fontal sinus, or ethmodial sinuses on the on side [41737]
- Antrum, intranasal operation on or removal of foreign body [41716]
- Muscle, bone or cartridge, excision of one or more of [(31340]
- Myrinoplasty, post-aural or endaural approach with or [41530]
- Nasendoscopy or sinoscopy [41764]
- Antrostomy (radical) (Anaes.) [41710]
- Clearance of middle ear for granuloma, cholesteatoma and [41635]
- Nasal bones, treatment of fracture of, by reduction (Anaes.) [47738]
- Cauterisation (other than by chemical means) or cauterisation [41674]
- Ear toilet requiring use of operating microscope [41647]
- Excision of rim of eardrum perforation, not being a service [41644)
- Abscess or inflammation of middle ear, operation for [41626]
- Nasal haemorrhage, arrest of during an episode of epistaxis [41677)

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- Tympanic membrane, micro-inspection [41650]
- Nasolacrimal tube (bilateral) replacement of, or lacrimal [42611]
- Middle ear, exploration of (Anaes) [41629]
- Nasal polyp or polypi (simple), removal of [41662]
- Tongue tie, mandibular fremulum or maxillary frenulum, repair [30281]
- Salivary duct cannulation / Salivary Duct dilation {30262}
- Sialendoscopy and salivary duct Kenalog injection [30262]
- Sialendoscopy with stone removal {30266} Commence March 2023

ORAL MAXILLOFACIAL / DENTAL

- Wisdom Teeth extraction [Dental]
- Teeth extraction [Dental]
- Enucleation of mouth cysts [Dental]
- Dental implants [Dental]
- General Periodontal [Dental]

FACILITIES AND EQUIPMENT

- The facility has appropriate surgical instrumentation, consumable and equipment for the safe provision of care to paediatric patients.
- Specific paediatric anaesthetic equipment and consumables and provided on the Anaesthetic trolley for the case-mix.
- A paediatric emergency trolley (Broselow Trolley) which has colour-coded specific drawers designed to utilise the Broselow Method for emergency paediatric care and resuscitation is provided.
- The Anaesthetic representative on the MAAC together with the Clinical Manager/Director of Nursing annually reviews the provision of anaesthetic and resuscitation facilities and equipment consistent with The Australian and New Zealand College of Anaesthetists (ANZCA) and the Australian Resuscitation Council (ARC) guidelines and standards; or as and when new paediatric procedures are approved by the MAAC.
- Compulsory advanced resuscitation training is provided to all nursing staff annually.

PERFORMANCE INDICATORS:

This policy relates to entries on the Risk Register (Policy L&M 3.6) and audited annually: Clinical – Patient Centred Care – Clinical Risk Audited Against:

- QPS Audits and Indicators: Patient Complaints, Incidents and Near Misses, Patient Satisfaction
- PMA Reviews and Indicators: Anaesthetic Drug & Equipment, Emergency Trolley & Pharmacy Review, External incidents, Emergency Event – Rapid Response/Escalation of Care by Carers.
- 3. ACHS Clinical Indicators: Adverse Events, Unplanned Transfers, ICU Admissions post-op, Paediatric trained staff.

REFERENCES:

- 'Day Surgery in Australia Report and Recommendations of the Australian Day Surgery Council of Royal College of Surgeons, Australian & New Zealand College of Anaesthetists and the Australian Society of Anaesthetists' Revised Edition 2018
- International Association for Ambulatory Surgery 'Day Surgery Development and Practice' 2006 Edition
- 3. NSW Private Health Facilities Regulation 2017
- 4. ANZCA http://www.anzca.edu.au/resources/professional-documents
- ARC https://resus.org.au/quidelines/

RATIFIED BY: Quality Review Committee and Audit Committee Board	RATIFIED BY:	Quality Review Committee	Medical Advisory and Audit Committee	Board
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DATE:	November 2022	November 2022	November 2022
REVIEW DATE:	November 2023	November 2023	November 2023
PREVIOUS REVIEW:	5/2018, 10/2018, 11/2018, 2019, 2020, 2021		

DATE	POLICY CHANGES
November 2022	Reviewed at Strategic Planning Day – Addition procedure and Item numbers for Salivary duct cannulation, Salivary Duct Dilatation, Sialendoscopy and salivary duct Kenalog injection, Sialendoscopy with stone removal
November 2021	Reviewed at Strategic Planning day – updated reference
November 2020	Review at Strategic Planning Day October 2020 – Nil changes.
November 2019	Policy reviewed at Strategic Planning Day with the following revisions: Update of CMP to AMP Update of the ratified by section to record review by the Board.
November 2018	 Compulsory advanced resuscitation training is provided to all nursing staff annually. Update to include additional procedures: Addition of orbital cyst in procedure name: Dermoid cyst / orbital cyst [42574] Addition of additional item codes for Strabismus [42833], [42836], [42839], [42842] Addition of item code [42569] for Removal of foreign body [42542] [42569] Addition of Dental implants [Dental] Addition of General Periodontal [Dental]
October 2018	 Inclusion of tonsillectomy age range from Patient Selection Protocol and paediatric sleep apnoea age range Amendment of age range: 12 months and above or by risk assessment between surgeon, anaesthetist and nursing staff. Amendment of age range Tonsillectomy: less than 3 years of age only by risk assessment between surgeon, anaesthetist and nursing staff.
May 2018	 Creation of a specific Approved Paediatric Procedures policy from the previous PMA Group Approved Procedures Policy Each centre has different case-mixes warranty their own specific policy. Addition of CMBS item numbers to procedures consistent with NSW DOH licensing requirements. Addition of references to ANZCA & ARC guidelines relating to emergency equipment provisions relative to adult case mix. Incorporation of existing yearly PMA Anaesthetic trolley review process into policy Performance Indicators Added

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