**Nurse Led Full Assessment Proforma Content**

*This is not a complete document, it’s a guide to the content that should be included in comprehensive preassessment. Each provider will have their own electronic platform/ form for capturing this information.*

*You may find that it’s quite in-depth for the type of children your service serves. Each heading should be assessed though, and the detail can be tailored to each child. Remember pre-assessment sometimes picks up undiagnosed health concerns, so the assessment should be systematic.*

**Demographics**

**Preassessment Clinic (PAC) details -** date of nurse PAC, date of consultant PAC (if needed)

**Procedure** details- speciality, indication, date of procedure, consultant

**PAC status**

* Colour coded:

Red - Do not proceed.

Amber - For further investigation and/or consultation with other specialities.

Green - Proceed with anaesthetic and procedure.

* Day case/ overnight stay
* Preferred place on list
* Post op requirements, HDU/PICU (if relevant), NIV
* PA valid till

**Alerts**

* For example: Difficult airways, previous anaesthetic problems, allergy, infection status

**Summary of PA**

**Action plan made in PA**

**Social history**

* Family structure, safeguarding concerns, social worker details, language needs, interpreter required, religion
* Practicalities: struggles getting to hospital; transport, time off work, support network

**Consent**

* Who has PR
* If parents don’t have PR give details who can consent
* Plans for consent on day of surgery

**Every Contact Counts**

Utilise this systematic health review to provide health promotion and sign post to other resources (available on the STPN Preassessment web page)

* Healthy weight
* Active life style
* Dental health
* Mental health
* Immunisations
* Smoking at home
* Teenage health- Sexual health, alcohol, non-prescription drugs

**History of presenting complaint**

Background. Has anything changed since being listed? (Sense check that the issue requiring surgery hasn’t resolved)

**Systematic assessment**

Include names of specialist consultants where child under them for underlying medical conditions

|  |
| --- |
| **Birth History**  Details, Gestation, Neonatal course if premature (days ventilated/CPAP) |
| **Airway**  Details of assessment, previous anaesthetic concern including family history, condition/ syndrome affecting airway/ mouth opening, OSA/sleep disordered breathing, sleep study results, surgery on jaw or neck, dental health |
| **Respiratory**  Details of assessment, noisy breathing (snoring? stridor? Or wheezing?), shortness of breath (at rest, on exertion, on feeding), asthma or other chronic respiratory disease (last hospital admission relating to this), recurrent chest infections (date of last infection), home 02 or home ventilation (continuous/nocturnal) |
| **Cardiac**  Details of assessment, shortness of breath (on feeding, at rest, on exertion), thriving, cyanosis, normal saturations, latest haemoglobin, cardiac medications (sildenafil, diuretics, ACE inhibitors), pacemaker |
| **Neurology and Development**  Details of assessment, history of seizures (treatment and rescue plans), muscle weakness, scoliosis, VP shunt, developmental delay, mobility |
| **Haematology**  Details, details of bleeding or clotting disorders and treatments, haemoglobinopathies, G6PD deficiency , latest hb, perioperative plan |
| **Renal and Hepatic**  Details, Impaired renal function, dialysis, blood results, perioperative plan |
| **Gastro**  Details, usual feeding, feeding device?, impaired gastro mobility, requires thickened fluids? |
| **Endocrine/metabolic**  Details of assessment, perioperative plan, hypoglycaemic episodes, diabetic, Other endocrine illness e.g. Thyroid, Addisons, hypopituitarism |
| **Chromosomal abnormality**  Details |
| **Palliative care**  Details, advanced care directive |
| **Anxiety or psychology issues**  Neuro diverse behaviours, SEN, Preparation, anaesthetic plan and pre-med, play specialist involvement, psychology referral needed? |
| **Immunity/ infection**  Immunisations up to date, any recent/planned foreign travel |

**Physical assessment**

|  |
| --- |
| Height, Weight, BMI, Centile, swabs (or plan for) |
| **Airway**  Mouth opening-level of difficulty, jaw protrusion, neck movement, tracheostomy tube (details), wobbly teeth, dental health |
| **Respiratory**  Oxygen saturations (in air and in oxygen if relevant), respiratory rate, chest expansion (equal/reduced), recession, breath sounds (normal, equal), peak flow (with chronic respiratory conditions) |
| **Cardiac**  Pulse, blood pressure (compare right upper limb and lower limb), heart sounds (murmur?), Skin (colour, tone, temperature) |
| **Medication**  Drug, frequency, dose |
| **Adolescents**  Smoking, alcohol, non-prescription drugs, sexual activity (Trust policy on pregnancy testing) |
| **If procedure in next 3 weeks:**  Temperature, cough, recent exposure to infectious disease (last 21 days) |

**Criteria to refer to Consultant PAC**:

|  |  |
| --- | --- |
| Airway | Previous anaesthetic related complication or family history of malignant hyperthermia |
| Mouth opening is restricted |
| Severe OSA or sleep disordered breathing |
| Stridor |
| History of anaphylaxis |
| Respiratory | Shortness of breath |
| Uncontrolled or severe asthma or other respiratory condition |
| Home 02 or home ventilation |
| Productive cough and/or temperature (if procedure in next 3 weeks) |
| Cardiac | Failure to thrive |
| *Any* cardiac history (DGH teams, more specific for tertiary centres) |
| Neuro/muscular | Uncontrolled or severe seizures |
| Severe muscle weakness/ dystonia |
| Severe scoliosis |
| Haematological | Bleeding disorders and haemoglobinopathies  If perioperative plan for blood transfusion is needed |
| Renal | Impaired renal function |
| Endocrine/metabolic | If endocrine/metabolic perioperative plan is needed |
| Chromosomal | Chromosomal abnormality |
| Palliative | If Palliative care patient has no directive or a perioperative plan is required |
| Psychological | Anaesthetic plan for very anxious patient or parent |
| Body Weight | High BMI >45 or >35 with comorbidities-correct measure? Or failure to thrive |
| Major Surgery | Prolonged duration (>3 hours), need arterial or central lines, likely to need a HDU or PICU bed |

**Investigations ordered**

|  |  |
| --- | --- |
| Sickle cell screen | Coagulation |
| Full blood count | Liver profile |
| Renal function | ECG |
| Group and save | ECHO |
| Cross match (no. of units) | Pregnancy test (all menstruating girls and all girls over 12 yrs.) |