



STATEMENT ON ANAESTHESIA CARE OF CHILDREN IN HEALTHCARE FACILITIES WITHOUT DEDICATED PAEDIATRIC FACILITIES

1. INTRODUCTION

Anaesthesia for children is an area of practice in which the College strongly recommends specific training and experience. The College therefore recommends that a healthcare facility which is not dedicated to paediatric care but which proposes to manage children for anaesthesia and surgery should develop a policy which details criteria for management of anaesthesia, surgery and nursing care.

This policy should be developed and documented jointly by representatives of the anaesthesia, surgical and nursing staffs and should be reviewed at intervals of not more than five years.

It must always be recognised that the initial treatment of paediatric emergencies may be necessary in facilities and under circumstances where paediatric care is not normally provided. In this situation the child should be transferred to a specialist paediatric centre at the earliest opportunity.

2. FACTORS TO BE CONSIDERED WHEN DEVELOPING A POLICY INCLUDE:

2.1 **Age.** There should be a specified age at which any restrictions on management and referral policies come into effect. Children of less than 12 months of age are classified as infants and when less than 28 days as neonates. Risks associated with anaesthesia are greater in smaller children thus the policies are more likely to apply to infants and neonates.

2.2 **Staff training and experience.** Specialist anaesthetists are expected to have training in the care of infants and children. However individual anaesthetists may have varying recent experience in managing anaesthesia for children. They should not be required to provide anaesthesia care without regular clinical exposure to an extent necessary to maintain and be comfortable with their competence.

It will often be of benefit for a second anaesthetist to be present, to act as a skilled assistant for the care of infants and children classified as ASA 3 or greater.

Anaesthesia assistants and nursing staff providing care in the perioperative period must be trained in the care of children. Regular experience and tuition is essential if care of appropriate standard is to be provided. Sufficient numbers of staff must be available whenever children are managed in the facility.

A liaison should be established with a specialist paediatric facility so that authoritative advice is available at all times.

- 2.3 **Equipment and facilities.** Anaesthesia equipment must comply with College Professional Document T1 *Recommended Minimum Facilities for Safe Anaesthetic Practice in Operating Suites*. Specific requirements will include:
- 2.3.1 Appropriate equipment for the needs of infants and children.
 - 2.3.2 Climate control and equipment designed to meet the special needs of small children so that body temperature is maintained throughout the perioperative period.
 - 2.3.3 Monitoring equipment which complies with College Professional Document PS18 *Monitoring during Anaesthesia* and is suitable for use with infants and children.
 - 2.3.4 A separate ward area in the facility, staffed by appropriately trained personnel and able to cater for children and their families, separate from adult patient areas.
 - 2.3.5 An area where the parents and child can be seen privately in the perioperative phase, to discuss any intraoperative surgical or anaesthetic issues.
- 2.4 Criteria for transfer to a Specialist Children's Hospital or Facility. The distance to the nearest appropriate centres will be an important factor in determining the need for transfer. The following groups of patients should be considered for transfer:
- 2.4.1 Neonates
 - 2.4.2 Infants born at less than 37 weeks gestation and with a post-conceptual age of less than 52 weeks.
 - 2.4.3 Infants with a history of apnoeic episodes.
 - 2.4.4 Infants and children with unusual and/or complex medical or surgical problems classified as ASA3 or greater.

Related Professional Documents

PS18 - *Recommendations on Monitoring During Anaesthesia*

T1 *Recommendations on Minimum Facilities for Safe Anaesthetic Practice in Operating Suites*

COLLEGE PROFESSIONAL DOCUMENTS

College Professional Documents are progressively being coded as follows:

*TE Training and Educational
EX Examinations
PS Professional Standards
T Technical*

POLICY – defined as ‘a course of action adopted and pursued by the College’. These are matters coming within the authority and control of the College.

RECOMMENDATIONS – defined as ‘advisable courses of action’.

GUIDELINES – defined as ‘a document offering advice’. These may be clinical (in which case they will eventually be evidence-based), or non-clinical.

STATEMENTS – defined as ‘a communication setting out information’.

This document is intended to apply wherever anaesthesia is administered

This document has been prepared having regard to general circumstances, and it is the responsibility of the practitioner to have express regard to the particular circumstances of each case, and the application of this document in each case.

Professional documents are reviewed from time to time, and it is the responsibility of the practitioner to ensure that the practitioner has obtained the current version. Professional documents have been prepared having regard to the information available at the time of their preparation, and the practitioner should therefore have regard to any information, research or material which may have been published or become available subsequently.

Whilst the College endeavours to ensure that professional documents are as current as possible at the time of their preparation, it takes no responsibility for matters arising from changed circumstances or information or material which may have become available subsequently.

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