

WHAT IMMEDIATE POST-OPERATIVE NURSING CARE CONTRIBUTES TO A BETTER PATIENT OUTCOME AFTER A CHILD HAS HAD A DAY SURGERY TONSILLECTOMY AND ADENOIDECTOMY (T&A)?

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Identification of the problem/Overview: Current immediate postoperative nursing care of T&A patients includes: pain management, oral intake of fluid and other comfort measures such as ice collar or humidified oxygen. Some nurses encourage patients to drink fluids while others wait for the patient to have the desire to drink. Pain management may also vary. Some patients are given routine medication for pain while others are given pain medication PRN. Some nurse use ice collar therapy because they recognize the benefits while others feel it causes too much agitation. All nurses use humidified O2.

EBP Question/Purpose: What immediate post operative nursing care, contributes to a better patient outcome after a child has had a Day Surgery Tonsillectomy & Adenoidectomy?

Methods/Evidence: Literature search using EBSCO Host (Cinahl, Medline), Google Scholar

Significance of findings/outcomes: There were several research studies published in the medical literature and only one research study published in the nursing literature. The literature supports medicating Tonsillectomy and Adenoidectomy patients for pain and nausea before, during and after surgery. There was also literature that supports allowing the patient to decide their own diet advancement in place of forcing oral fluids postoperatively. There is a lack of evidence to support ice collar application in post operative tonsillectomy and adenoidectomy patients; however there is much research supporting ice use in orthopedics and dental procedures.

Implications for peri-anesthesia nurses and future research: Our goal was to develop a standard of care for nurses caring for the day surgery post operative tonsillectomy and adenoidectomy patient. Our recommendations are premedication with oral acetaminophen, administer scheduled PO pain medication, encourage hydration prior to being NPO for surgery, use of intraoperative antiemetic and allow the patient to advance diet as tolerated.