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Introduction and Purpose

- Pediatric tonsillectomy and adenoidectomy are among the most commonly performed outpatient pediatric surgeries in the United States.¹
- Uncontrolled pain is the main cause of morbidity after tonsillectomy, which can lead to complications such as decreased oral intake, dehydration, dysphagia, and sleep disturbance.²
- Because most postoperative care is performed at home, presurgical education is crucial to reduce postoperative complications, emergency department visits, and patient/caregiver anxiety.
- This study aims to characterize the parent/caregiver preferences for and satisfaction with several common forms of preoperative education for tonsillectomy and adenoidectomy.

Materials and Methods

- Prospective study performed at a single academic tertiary care hospital from July to December 2022.
- Parents and caregivers of pediatric patients undergoing tonsillectomy and/or adenoidectomy completed a preoperative questionnaire and interview assessing their knowledge of tonsillectomy care, anxiety about the procedure, and educational materials used.
- A post-operative survey was given 4-6 weeks after the surgery.
- Adverse events during this timeframe were recorded.
- Daytime phone calls to nursing staff during this period were analyzed to ascertain the reason for call, nurse-perceived preparedness of the caregiver, and emotional impact on nursing staff.

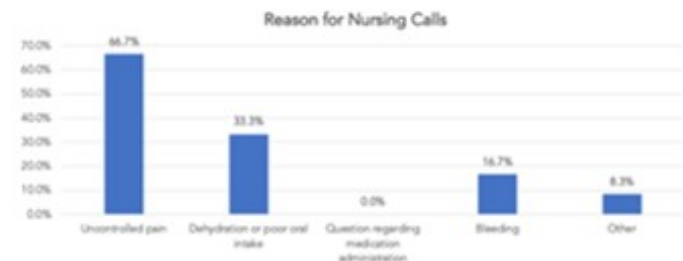
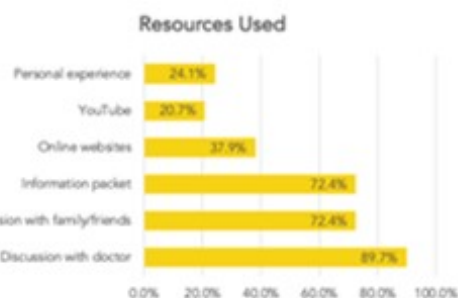
- 221 tonsillectomy surgeries performed; 23 caregivers invited to interview
- 28 subjects (12.7%) completed the pre-operative survey
- 20 (9.0%) completed the post-operative survey
- 18 subjects (8.1%) completed both

Results



Knowledge Testing	
Average Pre-Op Score	85.90%
Average Post-Op Score	86.50%
# Subjects Improved	8
# Subjects Remained Same	2
# Subjects Worsened	7
Greatest +Δ	22.20%
Greatest -Δ	-18.50%

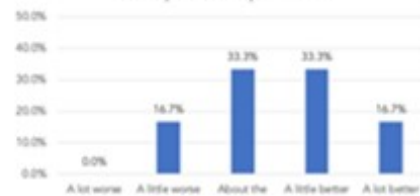
Adverse Events	
Total Patients	221
Pain/Dehydration, Total	2
Pain/Dehydration, Percent	0.9%
Bleeding, Total	13
Bleeding, Percent	5.9%



Self Perceptions Regarding At Home Care



Post-Operative Experience Compared to Pre-Operative Expectations



Conclusion

- Patients still perceived physician-directed resources (e.g. in person discussions, information packets) as the most helpful form of preoperative education.
- Despite feeling well equipped for post-surgical care, most parents/caregivers still feel anxious about the perioperative process.
- Diligent preoperative education may reduce postoperative unplanned revisit rates and call burden on the nursing staff.
- In this timeframe, return for postoperative pain/dehydration is lower than the national average. Bleeding rate is slightly higher than national average.

References

1. Cullen, KA, Hall, MJ, Goossens, A. Ambulatory surgery in the United States, 2006. *Revised*. Hyattsville, MD: National Center for Health Statistics; 2007. *National health statistics report*, no. 171.
2. Murali RB, Archer SM, Iannelli SL, et al. *Clinical Practice Guidelines: Tonsillectomy in Children* (Updated). *Otolaryngology-Head and Neck Surgery*. 2019;160(1):S1-S42. doi:10.1177/014999818801737