


Name of Policy: <u>Procedures for Pediatric Patients</u> Policy Number: 3364-100-45-19 Department: Hospital Administration Approving Officer: Chief Executive Officer - UTMC Chief of Staff Responsible Agent: Chief Nursing Officer Scope: The University of Toledo Medical Center and its Medical Staff	 Effective Date: 07/15/2020 Initial Effective Date: July 14, 1999
<input type="checkbox"/> New policy proposal <input type="checkbox"/> Major revision of existing policy	<input checked="" type="checkbox"/> Minor/technical revision of existing policy <input type="checkbox"/> Reaffirmation of existing policy

(A) Policy Statement

For the purpose of this policy, we define pediatric patients as those equal to or greater than 12 years of age whose height and weight are equal to or greater than the 50th percentile and have uncomplicated medical and surgical history (ASA (American Society of Anesthesiologist) classification less than P3*). Procedures for pediatric patients will only be performed in outpatient (ambulatory) settings. Limited observation stays will be provided for pediatric patients. Non-procedure-based admissions are not permitted.

(B) Purpose of Policy

To provide safe care for pediatric patients undergoing procedures at UTMC.

(C) Procedure

1. All pediatric patients requiring intensive care services or complex needs must be immediately transferred to a pediatric hospital.
2. Outpatient procedures may be provided to pediatric patients providing:
 - a. There is a pre-operative evaluation completed within 30 days and pertinent medical records are readily available to the care team.
 - b. The Attending Surgeon and Attending Anesthesiologist have ensured that the appropriate staff and resources are available to treat any foreseeable complications.
 - c. The outpatient surgery patient does not need an inpatient admission.
3. In the event that a pediatric patient requires an observation stay following a procedure, he/she may be cared for in observation status. Family Medicine must be consulted for the co-management of any pediatric patient in observation status.
4. If the length of stay exceeds the 48-hour target of observation status, the patient will be transferred to a pediatric hospital, unless the Surgeon, Family Medicine Attending, and the Chief Nursing Officer agree to prolong the stay. The Attending Surgeon must daily document the indication for a prolonged stay.
5. Pediatric patients are cared for on the Orthopedic ward (i.e., 6AB) with pediatric equipment and PALS (Pediatric Advanced Life Support) -certified nurses and physicians.
6. For any questions regarding individual situations, contact the on-call Medical Director.

* * ASA Classification of P3 is defined as a patient with severe systemic disease.

<p>Approved by:</p> <p><u>/s/</u> <u>07/20/2020</u> Richard P. Swaine, CPA Chief Executive Officer - UPMC Date</p> <p><u>/s/</u> <u>07/20/2020</u> Amanda Lenhard, M.D. Chief of Staff Date</p> <p><i>Review/Revision Completed By:</i> <i>Chief of Staff</i> <i>Chief Medical Officer</i> <i>HAS</i></p>	<p>Review/Revision Date: 6/13/01 10/10/01 12/12/01 7/9/03 7/12/05 3/14/2007 2/23/2011 4/1/2014 4/1/2017 4/1/2020 6/1/2020</p> <p>Next Review Date: 06/01/2023</p>
<p>Policies Superseded by This Policy: 7-45-19 – Procedures for Pediatric Patients</p>	