

SPECIALITY: **Ear, Nose and Throat**

PROCEDURE(S): **Adult tonsillectomy**

ALOS: **Day case to 1 night**

AVAILABLE AT: **Cirencester NHS Treatment Centre
Devizes NHS Treatment Centre
Emersons Green NHS Treatment Centre
Shepton Mallet NHS Treatment Centre**

INDICATIONS

Infection indications:

- 3 or more bacterial infections per year. Strep test not mandatory.
- History of peritonsillar abscess

Hypertrophy indications:

- Hypertrophy causing deglutition problems
- Hypertrophy causing airway obstruction (SAS)

PRIMARY CARE ASSESSMENT +/- DIAGNOSTICS

- Clinical assessment

EXCLUSION CRITERIA

- Please refer to the UKSH exclusion criteria detailed on pages 6/7

PREPARATION FOR SURGERY

- No food 6 hours prior to the procedure
- Sips of water up to 2 hours prior to the procedure
- If the patient takes **aspirin** they should stop this 7 days pre-operatively
- If the patient takes **warfarin** they should stop 4 days pre-operatively and visit their GP practice the day before for INR check, the results of this are to be phoned to PACU (for day cases) and PEC team for (inpatients). INR to be below 1.4 on day of surgery
- The patient receives a pre-admission telephone call no later than 7 days prior to admission to reassess fitness for surgery and reconfirm specific pre-operative instructions

FOLLOW-UP

- Follow-up call 24 hours post-discharge

DISCHARGE MEDICATION

- **Diffiam** mouthwash
- **Co-codamol** 60/1000mg PRN 4-6 hourly, up to 4 times a day
- **Diclofenac** 50mg 8 hourly x 3 days

SPECIALITY: **Ear, Nose and Throat**
PROCEDURE(S): **ENT Procedures include: inferior turbinectomy, sub-mucosal diathermy, turbinate outfracture, functional endoscopic sinus surgery (FESS), functional septorhinoplasty, nasal polypectomy, septoplasty**
ALOS: **Day case or 1 to 2 nights for FESS**

AVAILABLE AT: **Cirencester NHS Treatment Centre
Devizes NHS Treatment Centre
Emersons Green NHS Treatment Centre
Shepton Mallet NHS Treatment Centre**

INDICATIONS

- Persistent nasal obstruction, refractory to medical treatment
- Clinically obvious nasal polyps refractory to medical treatment
- Persistent facial pain suggestive of chronic sinusitis
- More than four episodes of acute sinusitis requiring treatment with antibiotics in one year
- To relieve nasal obstruction/snoring secondary to septal deviation

PRIMARY CARE ASSESSMENT +/- DIAGNOSTICS

- Clinical assessment
- Failed trial of topical steroid therapy for a minimum of 6 weeks

EXCLUSION CRITERIA

- Please refer to the UKSH exclusion criteria detailed on pages 6/7

PREPARATION FOR SURGERY

- No food 6 hours prior to the procedure
- Sips of water up to 2 hours prior to the procedure
- If the patient takes **aspirin** they should stop this 7 days pre-operatively
- If the patient takes **warfarin** they should stop 4 days pre-operatively and visit their GP practice the day before for INR check, the result of this is to be phoned to PACU (for day cases) and PEC team for (inpatients). INR to be below 1.4 on day of surgery
- The patient receives a pre-admission telephone call no later than 7 days prior to admission to reassess fitness for surgery and reconfirm specific pre-operative instructions

FOLLOW-UP

- Follow-up call 24 hours post-discharge
- Possible 3 and 6 week follow-up

DISCHARGE MEDICATION

- Medication (TTOs) will be prescribed as required

SPECIALITY: **Ear, Nose and Throat**
PROCEDURE(S): **Minor ear procedures: wax removal, microsuction, myringotomy and grommet insertion**

ALOS: **Day case**

AVAILABLE AT: **Cirencester NHS Treatment Centre
Devizes NHS Treatment Centre
Emersons Green NHS Treatment Centre
Shepton Mallet NHS Treatment Centre**

INDICATIONS

- > 20 DB of conductive hearing loss, confirmed by audiometry in patients with > 6 months hearing loss
- Recurrent otitis media, defined as 5 or more episodes per year requiring antibiotic therapy
- Impacted ear wax not removed by topical softeners and three attempts at syringing in primary care
- Impacted ear wax with perforated ear drum

PRIMARY CARE ASSESSMENT +/- DIAGNOSTICS

- Clinical assessment

EXCLUSION CRITERIA

- Please refer to the UKSH exclusion criteria detailed on pages 6/7

PREPARATION FOR SURGERY

- No preparation required for wax removal or microsuction
- For all other procedures:**
- No food 6 hours prior to the procedure
 - Sips of water up to 2 hours prior to the procedure
 - If the patient takes **aspirin** they should stop this 7 days pre-operatively
 - If the patient takes **warfarin** they should stop 4 days pre-operatively and visit their GP practice the day before for INR check, the result of this is to be phoned to PACU. INR to be below 1.4 on day of surgery
 - The patient receives a pre-admission telephone call no later than 7 days prior to admission to reassess fitness for surgery and reconfirm specific pre-operative instructions

FOLLOW-UP

- Follow-up call 24 hours post-discharge
- Wax removal, follow up not normally needed

DISCHARGE MEDICATION

- Medication (TTOs) will be prescribed as required