

Surgical Abdomen Referral Pathway

Paediatric patient identified with a suspected surgical abdomen in district general hospital

Any signs of critical illness?

Yes

No

Escalate internally & involve local critical care and surgical team

Ensure local process is followed so that child is seen by relevant specialities e.g. paediatrics, local surgical team.

Call SORT
They will advise on management and liaise with paediatric surgical teams

If further surgical advice is needed: Call the paediatric surgical registrar or consultant at Southampton or Oxford to discuss the case

SORT team will either:

- Arrange retrieval
- Advise time critical transfer
- Support local team transfer to a paediatric surgical centre
- Support local management
- Refer case to surgeons if no critical care needs

Surgical Team accept case and agreement for need for transfer to specialist surgical centre

Surgical team do not accept case & no requirement for transfer to specialist surgical centre

Suitable time frame* for transfer agreed with surgical team

Continue local management. If at any time the situation changes or there is a deterioration, re-start the pathway

Bed available & confirmed with receiving hospital

No Bed available within agreed timeframe*

Use STOPP form and arrange timely* local transfer to paediatric surgical bed

Use STOPP form and arrange timely* local transfer to UHS or OUH Paediatric ED for surgical assessment
(Call receiving ED so that they are aware of situation)

Surgical team informed as patient is leaving DGH and prepare for a member of their own team to receive/ assess the patient

Please remember when undertaking a transfer between hospitals, you must complete the STOPP form

If there is an anticipated delay in the availability of surgical team at OUH or UHS, the surgical consultant is notified and allocates a suitable team member to see and assess. Patient will be monitored in ED as per protocol with nursing triage & PEWS on arrival. If at any point deterioration or abnormal observations noted, the CED team would step in.

* Time frames have been deliberately left undefined. These are to be dictated based on clinical decision making of each individual case.

If at any time there are signs of critical illness or the child deteriorates, please call SORT

Key Relevant Standards from the NHS GIRFT Surgical Abdomen Report to note:

- DGH's should offer appendicectomy for children over 5 years of age
- A sick child with a surgical abdomen should be seen by paediatricians and surgeon within 2 hours