



PAEDIATRIC PATIENT WITH RECENT UPPER RESPIRATORY TRACT INFECTION

Children with a current or recent upper respiratory tract infection (URTI) have an increased risk of perioperative complications. These days specialist anaesthetists are able to make informed decisions regarding the assessment and management of these children, resulting in fewer children having their procedures cancelled.

Children under 10 years of age have 6 to 8 URIs per year, meaning finding a time when they are perfectly well is difficult. Also, children who have frequent URIs often benefit most from having their ear, nose and throat procedure. Children often have a dry cough for weeks after an URTI, this usually isn't a safety concern and surgery can proceed as planned.

The features of URIs that are associated with a higher chance of problems are:

- Green sputum and secretions
- Sore throat that limits normal eating and drinking
- Fever (temperature greater than 38°C)
- Tiredness and fatigue with minimal effort
- COVID 19 or Influenza diagnosis within the last 2 weeks

Should your child have any of the above, please contact your surgeon to defer the surgery for at least 2 weeks.

Other Influencing Factors:

- Ex-premature infant (born prior to 38 weeks gestation requiring neonatal care)
- Child's age less than 1 year
- History of asthma requiring preventer medications (Flixotide/Seretide)
- Parental smoking

If any of the above factors are relevant to your child, please ensure you have completed the Stace Anaesthetists online health questionnaire. This will help your anaesthetist to make the safest decision regarding your child's procedure. It is likely you could proceed to surgery with clinical assessment undertaken in the hospital on the day of surgery.

** This information sheet does not replace assessment on the day of procedure and is not intended to replace care by your General Practitioner.*



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