



PINEAPPLE

Your Initials _____

PINEAPPLE

Paediatric cancellation rates and perioperative clinical evaluation

Month / Year of birth (mm/yy) ___ / ____

Date of Surgery (dd/mm/yy) ___ / ___ / ____

ASA 1 / 2 / 3/ 4

Speciality _____

- Planned post op destination
- Daycase
 - Inpatient Overnight
 - HDU
 - PICU
 - NICU

- Co-Morbidities
- Asthma
 - Pulmonary HTN
 - Neuromuscular
 - Autistic Spectrum
 - Anxiety
 - Ex Prem
 - Other _____
 - Cardiac
 - Syndromic
 - Dev Delay
 - ADHD
 - Obesity
 - Diabetes

Prior to the day of surgery – did this child have any form of pre-operative assessment?

Yes

No

Date of Preassessment ___ / ___ / ____ Unknown

What was the format of this preassessment? (tick all that apply)

- Health Questionnaire
- Telephone Consultation
- Virtual consultation
- Face to Face Consultation
- Unknown

What was the role of an anaesthetist in the process? (tick all that apply)

- No Anaesthetist involvement required
- Anaesthetist Notes Review
- Face to Face Consultation
- Telephone Call with family
- MDT discussion involving anaesthetics
- Unknown
- Other _____

Was management altered as a result of pre-assessment? (tick all that apply)

- No change to management
- Clinical (bed allocation, referral)
- Further investigations requested
- Administrative (notes request etc)
- Other _____
- Unknown

Was anxiety identified as a potential perioperative challenge?

- Yes
- No
- Not sure

If Yes, how was this addressed (tick all that apply)

- Play specialist
- Psychologist
- Little Journey or similar app
- Hospital Visit
- Other _____

In your opinion, did pre-assessment make a difference to this individual patient?

- Yes
- No
- Unsure

Would pre-assessment have been helpful?

Yes No

(if needed please write a sentence on the overside and indicate this has been done by ticking the box below)

Please ensure no patient identifiable information is included)

Was anxiety an issue perioperatively? (tick all that apply)

- No
- Delay in list
- Change in list order
- Return to ward for pre-med
- Cancellation
- Other _____

Outcome

- Proceed as planned
- Organisational Delay
- Unplanned overnight stay
- Cancellation (please state reason) _____