

**OBSTRUCTIVE SLEEP APNEA IN PEDIATRIC PATIENTS:
DEVELOPING AN EFFECTIVE PREOPERATIVE SCREENING PATHWAY**

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Introduction:

The preoperative assessment of children prior to surgical and diagnostic procedures requires the evaluation for obstructive sleep apnea (OSA) symptoms. Research has shown that less than 3 % of children diagnosed with OSA are formally evaluated by an otolaryngologist or have had an overnight polysomnograph testing, usually in preparation for adenotonsillectomy. Frequently children that are assessed in the Preanesthesia Assessment Clinic (PAC), at the Hospital for Sick Children, present with an undiagnosed history of OSA symptoms. A comprehensive preoperative screening for OSA symptoms is essential to ensure that the appropriate post operative monitoring is booked for the child prior to the day of surgery to prevent unnecessary cancellation or delay in surgery.

Objectives:

The objectives of this presentation will:

1. Describe the prescreening and triage process utilized by the PAC team to assess the child for OSA symptoms
2. Outline the OSA clinical algorithm used in the PAC to determine post operative care

Method:

The preoperative assessment includes the child's: 1) night time sleep history, 2) day time activity level and 3) behavior patterns. The development of an OSA algorithm provides a guideline for the PAC staff to determine the appropriate post operative care that the child will likely require.

Conclusion:

The OSA algorithm has recently been implemented in the PAC to prescreen children that may be a risk prior to general anesthesia. This has been an effective tool to prescreen children for OSA symptoms and decreasing unnecessary surgical cancellations.