Caring for Patients Living with Autism in the Perioperative Setting
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Introduction: Prevalence data suggests that Autism Spectrum Disorder affects 1 in 36 children in the United States. Children living with autism often have behavioral challenges, as well as issues related to sensory processing and social communication. Due to co-morbidities involving the ear-nose-throat and gastrointestinal systems, as well as the need for general anesthesia for oral health maintenance, children living with autism have a greater likelihood of needing procedural care. The nature of the perioperative environment is often bright, loud, and fast-paced, includes many different care givers, and is generally disruptive to the patient’s normal routines.

Identification of the problem: There is a recognized need and desire to improve the care of perioperative patients living with autism.

EBP Question/Purpose: In children living with autism, does the presence of an individualized coping plan impact patient care and family satisfaction in the perioperative setting?

Methods/Evidence: Databases searched included CINAHL, OVID, Google Scholar, the Cochrane Library, Clinical Key, Pub Med and the National Guideline Clearinghouse from 2011-2021. Search terms included the following: autism spectrum disorder, children, coping plan, perioperative management, anesthesia management, behavioral coping plan, behavioral challenges, and perioperative. The search of the literature yielded thirty-six articles. Thirteen articles met inclusion criteria, were reviewed and included as evidence. Twelve were evaluated as Level C evidence and one as Level E evidence.

The evidence supports an individualized coping plan for children with autism and their families. Proactively creating a coping plan for a child with autism who needs perioperative care is generally considered a best practice. Early identification and comprehensive assessment, environmental modifications, and equipping staff with the knowledge and tools necessary will help create more successful visits.

Significance of Findings/Outcomes: We have implemented a system to create individualized coping plans for children living with autism which are accessible to all care givers. Over one year, a perioperative coping plan has been in place for an average of sixty-five percent of patients. Staff, provider and family verbal feedback has been positive. Satisfaction survey results for dental patients have improved, with a Net Promoter Score increase of 7.5% and an 11.5% increase in parents feeling that they were involved in the visit. This work has spread to the outpatient surgery center, inpatient units, outpatient clinics and the Imaging department as well.

Implications for perianesthesia nurses and future research: Along with considering environmental modifications, having a coping plan in place helps the health care team to provide care individualized to the patient, offering a smoother perioperative experience for all.