

Updated Tonsillectomy Policy Extract from South Yorkshire and Bassetlaw Commissioning for Outcomes Policy – v22

Spec	Ref	Intervention	Criteria for treatment	Evidence Base / Local Guidance	Process
ENT	1H	Tonsillectomy (Significant changes to criteria 2021)	<p>The CCG will only fund tonsillectomy when one or more of the following criteria have been met:</p> <p>Primary care assessment-</p> <ul style="list-style-type: none"> Recurrent attacks of tonsillitis as defined by: <p>Sore throats are due to acute tonsillitis which is disabling and prevents normal functioning AND 7 or more well documented, clinically significant *, adequately treated episodes in the preceding year OR</p> <ul style="list-style-type: none"> 5 or more such episodes in each of the preceding 2 years OR 3 or more such episodes in each of the preceding 3 years <p><i>*A Clinically significant episode is characterised by at least three of the following (Centor criteria):</i></p> <ul style="list-style-type: none"> -Tonsillar exudate -Tender anterior cervical lymphadenopathy or lymphadenitis -History of fever (over 38°C) 	<p>SY&B Commissioners noted that referrals for tonsillectomy for recurrent tonsillitis require additional clinical input to assess against national criteria (number of occurrences of sore throats) hence the recommendation to use IFR</p> <p>Burton MJ, Glasziou PP. Tonsillectomy or adeno-tonsillectomy versus non-surgical treatment for chronic/recurrent acute tonsillitis. <i>Cochrane Database of Systematic Reviews</i> 1999, Issue 3. Art. No.: CD001802. First published online: July 26 1999. Available from: http://www.cochrane.org/reviews/en/ab001802.html (accessed 2019)</p> <p>Osbourne MS, Clark MPA. The surgical arrest of post-tonsillectomy haemorrhage: Hospital Episode Statistics 12 years on. <i>Annals RCS.</i> 2018.May (100) 5: 406-408</p> <p>Paradise JL, Bluestone CD, Bachman RZ. Efficacy of tonsillectomy for recurrent throat infection in severely affected children. Results of parallel randomized and non-randomized clinical trials. <i>N England J Med</i> 1984:310(11):674-83</p>	<p>Prior Approval via IFR (Clinical Letter and Checklist)</p> <p>Notification via IFR for biopsy or removal of lesion</p> <p>The IFR panel will provide clinical oversight on the management of these policies.</p> <p>Refer through IFR for exceptionality.</p>
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			<p>-Absence of cough Two or more episodes of quinsy (peritonsillar abscess)</p> <ul style="list-style-type: none"> Severe halitosis secondary to tonsillar crypt debris Failure to thrive (child) secondary to difficulty swallowing caused by enlarged tonsils Obstructive sleep disordered breathing causing severe daytime and night time symptoms. <p>Primary care clinicians should send a brief referral letter and a copy of the checklist to IFR for prior approval</p> <p>Secondary care assessment-</p> <ul style="list-style-type: none"> Obstructive sleep disordered breathing causing severe daytime and night time symptoms. <p>Obstructive sleep disordered breathing is defined as:</p> <ul style="list-style-type: none"> -Grade 3 or 4 tonsils AND -Symptoms persisting for more than three months AND -Night time symptoms- consistent snoring AND consistent wakefulness OR secondary enuresis OR witnessed apnoeas OR restlessness/excessive sweating AND 	<p>Rubie I, Haighton C, O'Hara J, Rousseau N, Steen N, Stocken DD, Sullivan F, Vale L, Wilkes S, Wilson J. The National randomised controlled Trial of Tonsillectomy IN Adults (NATTINA): a clinical and cost-effectiveness study: study protocol for a randomised control trial. <i>Trials</i>. 2015 Jun 6;16:263. https://www.ncbi.nlm.nih.gov/pubmed/26047934 (accessed 2019)</p> <p>Scottish Intercollegiate Guidelines Network Management of sore throat and indications for tonsillectomy. A National clinical Guideline. April 2010 https://www.sign.ac.uk/assets/sign117.pdf (accessed 2019)</p> <p>Safe Delivery Of Paediatric ENT Surgery In The UK: A National Strategy https://www.entuk.org/sites/default/files/files/Safe%20Delivery%20Paediatric%20ENT.pdf (accessed 2020)</p>	



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			<ul style="list-style-type: none"> -Daytime symptoms- impaired school performance OR hyperactivity/aggression OR altered mood OR excessive tiredness <p>Secondary care clinicians should send a clinical letter and copy of the GP referral to IFR for prior approval</p> <ul style="list-style-type: none"> Biopsy/removal of lesion on tonsil <p>Secondary Care clinicians should send a clinical letter and copy of the GP referral to IFR for notification and monitoring (prior approval not required).</p>		