

LOS ANGELES COUNTY DEPARTMENT OF HEALTH SERVICES HARBOR-UCLA MEDICAL CENTER

SUBJECT: CARE OF PEDIATRIC PATIENTS WITH GENERAL PEDIATRIC POLICY NO. 349

SURGICAL PROBLEMS

CATEGORY: Provision of Care	EFFECTIVE DATE: 3/91
POLICY CONTACT: Christian de Virgilio, MD	UPDATE/REVISION DATE:
REVIEWED BY COMMITTEE(S):	

PURPOSE:

To optimize nursing and ancillary care, and to ensure communication among the surgical service physicians, pediatricians and families, coordinated care by Pediatrics and Pediatric Surgery will be provided for all pediatric patients with general pediatric surgical problems admitted to the ward, intermediate-care unit, and intensive care units.

POLICY:

Harbor has established structured guidelines for care of patients with pediatric surgical problems admitted to the pediatric ward, intermediate-care unit, and intensive care units.

PROCEDURE:

- 1. All pediatric surgical patients admitted to the Pediatric ward, intermediate-care unit, and intensive care unit are admitted to the Pediatric service regardless of diagnosis. Trauma patients will be surgically managed by the General Surgery/Trauma team (American College of Surgeons guidelines) with consultation as needed by the Pediatric Surgical Service. Pediatric Surgical patients with acute surgical problems will have a History and Physical completed by an Intern or Resident on the pediatric ward or ICU service. This service is provided to all children regardless of medical or surgical problems. The Surgical Resident completes the initial history and physical examination on all scheduled admissions/elective surgeries.
- 2. The Attending Pediatric Surgeon, Pediatric Surgical Resident, and Attending Pediatrician will be identified on the medical record. For Trauma/General Surgical patients, the Attending Surgeon, Chief Surgical Resident, and Attending Pediatrician will be identified on the medical record.
- 3. For existing Pediatric inpatients, with newly discovered surgical problems, a consultation by either Pediatric Surgery or Trauma Surgery will be obtained in a timely fashion. The need for surgical consultation will be documented by the responsible Pediatric Resident. The time and date that the

	0/97, 6/02, 2/05, 10/06, 10/07, 2/12, 9/14	•
REVIEWED:	: 10/92, 3/96, 2/02, 6/02, 2/12, 9/14, 9/17	⁷ , 8/22
APPROVED	BY:	
	Anish Mahajan, MD	Griselda Gutierrez, MD
	Chief Executive Officer	Associate Chief Medical Officer
Chief Medical Officer		
	 	
	Jason Black, N	/IBA, DNP, RN
	Chief Nursing	Officer



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surgical consultation was obtained will also be documented by the Pediatric team. A consult note will be completed and placed in the medical record in a timely fashion by the responsible Surgical Resident.

- 4. Routine pediatric orders will generally be entered by the Pediatric House officers. Orders related to preoperative, intraoperative, or postoperative surgical care will be entered directly or under the supervision of the Surgical Resident or Attending and effected by the nurses. To foster optimal care, orders written by either service will be communicated to the other.
- 5. A "Surgical Informed Consent" will be obtained by the Surgical Resident.
- 6. Discharge summaries on surgical cases:
 - a. A complete discharge summary will be documented in the medical record by the Intern or Resident on the discharging Pediatric service.

Reviewed and approved by:

Beverley a. Felice

Medical Executive Committee 08/2022

Beverley A. Petrie, M.D.

President. Professional Staff Association