Children with AppendicitiS during the CoronAvirus panDEmic (CASCADE)

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The current coronavirus pandemic is placing NHS services in an unprecedented situation and there will be impact on the delivery of care for non-coronavirus patients. Guidance from the Royal Colleges recommends change in standard surgical treatment pathways. Clinicians may decide or be encouraged to consider treating some conditions differently to their usual practice. This will certainly have an impact on practice and may influence outcomes.

The management of children with acute appendicitis is one such condition. A number of different treatment options exist and current pathways may well be changed in some centres.

This CASCADE study has been set-up to capture data relating to this.

This initial survey aims to capture the current and anticipated impact of the coronavirus pandemic on treatment of children with acute appendicitis. It comprises just 4 questions and should take no more then 5 minutes to complete.

It is for completion by consultants only please. This is not because we don't value the views of trainees but in this particular instance we feel that consultants are more likely than ever going to be making decisions.

We will generate a rapid summary of the data in order to provide you with an overview of how practice is changing across the country and to share ideas for change that are considered useful.

All responses will be treated anonymously. Please complete the entire survey for your responses to be saved.

Definitions

For the purposes of the questions that follow please use the following definitions:

SIMPLE APPENDICITIS: a child with a presumed clinical or radiological diagnosis of simple appendicitis.

COMPLICATED APPENDICITIS: a child with a presumed clinical or radiological diagnosis of complicated appendicitis (comprising anything other than simple appendicitis but not an appendix mass).

APPENDIX MASS: a child that has a presumed clinical or radiological diagnosis of an appendix mass.

We appreciate it is not always possible to make an accurate distinction between these groups but please answer the questions the best you can according to these definitions.

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Question 1	
In the past 2 weeks have you managed a child with acute appendicitis differently to your usual practice as a result of the coronavirus pandemic?	○ Yes ○ No
In what way was your management of SIMPLE APPENDICITIS different to your usual practice?	 Simple appendicitis: used non-operative treatment as opposed to appendicectomy Simple appendicitis: used enteral antibiotics or shorter course of IV if managing conservatively Simple appendicitis: longer delay than usual in gaining access to operating theatre Simple appendicitis: used open approach in place of laparoscopy (Tick all that apply)
In what way was your management of COMPLICATED APPENDICITIS different to your usual practice?	 □ Complicated appendicitis: used non-operative treatment as opposed to appendicectomy □ Complicated appendicitis: earlier switch to oral antibiotics □ Complicated appendicitis: longer delay than usual in gaining access to operating theatre □ Complicated appendicitis: used open approach in place of laparoscopy □ Appendix mass: non-operative treatment as opposed to appendicectomy □ Appendix mass: no offer of interval appendicectomy as opposed to routine offering of interval appendicectomy (Tick all that apply)
In what way were these GENERAL ASPECTS OF MANAGEMENT different?	 ☐ Any appendicitis: routine imaging for all to be certain of diagnosis ☐ Any appendicitis: CT instead of US (including use of chest CT or to protect staff) ☐ Any appendicitis: transfer of a child to our hospital for treatment when that treatment would usually be provided at local hospital (Tick all that apply)
Was this different management brought about:	□ as an active decision by you / your department □ as a passive decision due to different resource availability (e.g. you could not get a child to surgery and they got better on antibiotics) □ on the instruction of your department / institution / NHSE □ instigated by the parents (Tick all that apply)

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Question 2	
Thinking ahead and given what you currently know about the likely effect the coronavirus pandemic will have, please indicate if you anticipate that you will manage children with acute appendicitis differently compared to your usual practice DURING the pandemic (for example you may be considering different thresholds for imaging, or the use of non-operative treatment in place of appendicectomy).	Yes - differentlyNo - usual practice
If yes, in what way do you currently anticipate there will be differences for children with SIMPLE APPENDICITIS? Please only tick the box if you anticipate your management will be different to your usual practice for the specific clinical situation listed.	 ☐ Simple appendicitis: I will actively offer non-operative treatment to all children with simple appendicitis ☐ Simple appendicitis: I will consider non-operative treatment for children with simple appendicitis at parental request ☐ Simple appendicitis: I will actively perform open (as opposed to laparoscopic) appendicectomy in children with simple appendicitis (Tick all that apply)
If yes, in what way do you currently anticipate there will be differences for children with COMPLICATED APPENDICITIS? Please only tick the box if you anticipate your management will be different to your usual practice for the specific clinical situation listed.	 □ Complicated appendicitis: I will actively offer non-operative treatment to children with complicated appendicitis □ Complicated appendicitis: I will consider non-operative treatment to children with complicated appendicitis at parental request □ Complicated appendicitis: I will actively perform open (as opposed to laparoscopic) appendicectomy in children with complicated appendicitis □ Complicated appendicitis: I will actively pursue a shorter than usual course of intravenous antibiotics in children with complicated appendicitis □ Appendix mass: I will actively offer non-operative treatment to children with appendix mass □ Appendix mass: I will consider non-operative treatment to children with appendix mass at parental request □ Appendix mass: I will not offer routine interval appendicectomy in children who have has successfu non-operative treatment of appendix mass (Tick all that apply)

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If yes, in what way do you currently anticipate there will be differences in the GENERAL MANAGEMENT of children with appendicitis?	 Any appendicitis: Routine imaging for all cases of suspected appendicitis to be certain of diagnosis Any appendicitis: CT scan instead of US for
Please only tick the box if you anticipate your management will be different to your usual practice	diagnosis of appendicitis Any appendicitis: More frequent use of imaging to quide management (e.g. select cases for
for the specific clinical situation listed.	non-operative treatment / reduce negative appendicectomy rate)
	 Any appendicitis: consultant review for all cases prior to considering surgery
	 Any appendicitis: we will likely be sending children with appendicitis to another hospital for treatment
	 Any appendicitis: we will likely be treating children at my hospital who would usually be treated somewhere else
	(Tick all that apply)

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Question 3	
Thus far during this pandemic, has your department or your institution made any decisions or placed any restrictions on you that you feel will influence how you manage children with acute appendicitis that are not included in responses to the questions above	○ Yes ○ No
Please describe	

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Question	4
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Do you have any suggestions for practice change during the pandemic in relation to acute appendicitis that you wish to share? These may be useful to help other institutions manage children with appendicitis.

Any suggestions will be treated anonymously.

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In order to ensure that we send you a copy of the rapid summary findings of this survey, please provide your email address. We will also send you a link to the survey at the end of the pandemic so we can understand the impact better.	(Whilst this is optional it would be really great if as many people as possible would be willing to complete a survey later in the year so we can maximise the opportunities for learning.)
Please enter the name of the institution at which you work (this is just so we can identify responses from the same centre)	
Are you a	○ General Surgeon○ Specialist Paediatric Surgeon
If you wish to receive acknowledgement of your participation in this national survey please provide your name.	

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