



**Coventry and
Warwickshire**
Integrated Care Board

Tonsillectomy / Adenotonsillectomy Policy

Reference Number:	This will be applied to all new ICB-wide PPSs by the Governance and Corporate Affairs Team and will be retained throughout its life span.
Version:	Version 1.0
Name of responsible Committee and date approved or recommended to Integrated Care Board Board:	Audit Committee
Date approved by the Integrated Care Board (if applicable):	1 July 2022
Next Review Date:	1 April 2025
Expiry Date:	1 October 2025
Name of author and title:	Lucy Dyde
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Department:	Corporate Office

VERSION HISTORY

Date	Version	Changes made to previous version	Consulting and Endorsing Stakeholders, Committees / Meetings / Forums etc.

Treatment	Tonsillectomy/Adenotonsillectomy
Indication	Recurrent tonsillitis
Treatment:	<p>The following criteria¹ are indications for consideration and funding of tonsillectomy/adenotonsillectomy for both children and adults:</p> <ul style="list-style-type: none"> • Sore throats are due to acute tonsillitis AND the following documented evidence applies: <ul style="list-style-type: none"> ○ 7 or more documented, clinically significant, adequately treated sore throats in the preceding year; OR ○ 5 or more episodes in each of the preceding two years; OR ○ 3 or more episodes in each the preceding three years. <p>The ICB will also fund patients after specialist assessment for:</p> <ul style="list-style-type: none"> • Acute and chronic renal disease resulting from acute bacterial tonsillitis. • As part of the treatment of severe guttate psoriasis. • Metabolic disorders where periods of reduced oral intake could be dangerous to health. • Periodic fever, Aphthous stomatitis, Pharyngitis, Cervical adenitis (PFAPA). • Severe immune deficiency that would make episodes of recurrent tonsillitis dangerous. <p>Note that this guidance only relates to patients with recurrent tonsillitis. This policy should not apply to other conditions where tonsillectomy should continue to be funded and they include:</p> <ul style="list-style-type: none"> • In adults, a history of obstructive sleep apnoea associated with tonsillar enlargement that is supported by a sleep study or other accepted method of diagnosis. • One episode of peri-tonsillar abscess (recurrent quinsy). • Patients with tonsillar enlargement causing acute upper airway obstruction requiring emergency surgery. • Suspected cancer. <p>¹ SIGN 117 (Scottish Intercollegiate Guidelines Network) (April 2010) Management of Sore Throat and Indications of Tonsillectomy</p> <p>Prior approval from the Integrated Care Board will be required before any treatment proceeds in secondary care unless an alternative contract arrangement has been agreed with the ICB that does not necessitate the requirement of prior approval before treatment.</p>
Diagnostic and Procedure Codes	F341, F342, F343, F344, F347, F348, F349, F361
Equality Impact	https://www.england.nhs.uk/evidence-based-interventions/