NEL CCGs (EBI): Tonsillectomy				
Any false declarations made on this form will invalidate funding approval				
PATIENT CONSENT				
Before providing patient identifiable data on this form, please confirm that the patient (or in the case of a minor or vulnerable adult with the parent/legal guardian/carer) has given appropriate explicit consent for sensitive personal information on this form to be passed to the CCG and/or CSU for processing this funding request and validating subsequent invoices. Consent given:				
APPLICANT DETAILS				
Clinician Making Request:		Department:		
Clinician Full Name:		Designation:		
Email (nhs.net):		Telephone:		
PATIENT DETAILS				
NHS Number:		GP Practice Name:		
Patient DOB:		GP Practice Code:		
Patient Hospital No:		Sub-Type:	N/A 🗸	
Form Information	•			
The NHS should only commission this surgery for treatment of recurrent severe episodes of sore throat when the following criteria are met, as set out by the Scottish Intercollegiate Guidelines Network (SIGN) guidance and supported by ENT UK commissioning guidance.				
Does this request relate to a procedure that has already been carried out?		□Yes	□No	
Please indicate whether patient meets the following criteria: Please choose one of the two sections: Section 1: Acute tonsillitis Section 2: Tonsillitis damaging to health or tonsillectomy required as part of on-going management				
Section 1: Acute tonsillitis With prior approval, NEL CCGs will fund tonsillitis when Q1. Please tick to confirm that the patient meets ALL of the fo Patient has sore throats are due to acute tonsillitis AND The episodes are disabling and prevent normal functioning Q2. Please confirm which of the following criteria the patient r Seven or more, documented, clinically significant, adequated five or more such episodes in each of the preceding two such acute tonsillitis.	ollowing meets: ately tre	g criteria: eated sore throats in the preceding year OR DR	net:	

Section 2: Tonsillitis damaging to health or tonsillectomy required as part of on-going management				
NEL CCGs will fund surgery when one of the following criteria are be met:				
☐ Acute and chronic renal disease resulting from acute bacterial tonsillitis OR				
☐ As part of the treatment of severe guttate psoriasis OR				
☐ Metabolic disorders where periods of reduced oral intake could be dangerous to health OR				
☐ PFAPA (Periodic fever, Apthous stomatitis, Pharyngitis, Cervical adenitis) OR				
Severe immune deficiency that would make episodes of recurrent tonsillitis dangerous				
There are a number of medical conditions where episodes of tonsillitis can be damaging to health or where tonsillectomy is required as part of the on-going management. In these instances tonsillectomy may be considered beneficial at a lower threshold than this guidance after specialist assessment.				
Additional information				
Further information on the SIGN guidance can be found here: http://www.sign.ac.uk/assets/sign117.pdf				
Please note this guidance only relates to patients with recurrent tonsillitis. This guidance should not be applied to other conditions where tonsillectomy should continue to be funded, these include:				
 Obstructive Sleep Apnoea / Sleep disordered breathing in Children Suspected Cancer (e.g. asymmetry of tonsils) Recurrent Quinsy (abscess next to tonsil) Emergency Presentations (e.g. treatment of parapharyngeal abscess) 				
It is important to note that a national randomised control trial is underway comparing surgery versus conservative management for recurrent tonsillitis in adults which may warrant review of this guidance in the near future.				
For further advice on completing this form please contact the prior approvals team on 020 3049 4366 or nelcsu.pas@nhs.net				
SUBMISSION DECLARATION				
I confirm that the above information is complete and accurately describes the patient's condition.				
Submitting User Date				