

Reference (include title, author, journal title, year of publication, volume and issue, pages)	Evidence level (I-VII)	Key findings, outcomes or recommendations
Tam, G.X & Tunkel, D.E (2017) Control of Pain After Tonsillectomy in Children A Review, JAMA Otolaryngology-Head & Neck Surgery Volume 143, Number 9 pp.937-942	II	Pain management should be pharmacological and non-pharmacological. Codeine should not be used. Paracetamol may be inadequate on its own. Opioids cause respiratory depression in children with OSA, NSAIDs are effective however concerns in regards of bleeding have been identified.
Scalford, D. Flynn-Roth, R. Howard, D. Phillips, E. Ryan, E & Finn Davis, K. (2013) Pain Management of Children Aged 5 to 10 Years After Adenotonsillectomy, Journal of PeriAnesthesia Nursing, Vol 28, No 6, pp.353-360	IV	Patients who received combination analgesic therapy had significantly lower pain scores than those who received monotherapy. Parental presence may be helpful in reducing postoperative pain.
Howard, D. Finn Davis, K. Phillips, E. Ryan, E. Scalford, D. Flynn-Rith, R & Ely, E. (2014) Pain management for paediatric tonsillectomy: An integrative review through the perioperative and home experience. Journal for Specialists in Pediatric Nursing vol. 19 pp.5-16	II	Adequate preoperative and postoperative education for the parent and child in regards to analgesia is imperative, appropriate post-operative pain assessment tools should be utilised and both pharmacological and nonpharmacological techniques for pain relief should be utilised.
Ramos, S.D. Mukerji, S. & Pine, H.S. (2013) Tonsillectomy and Adenoidectomy, Pediatr Clin Am 60, pp.793-807 Retrieved from ClinicalKey.com.au	VII	Sleep disordered breathing/Obstructive Sleep Apnoea is the most common indication for pediatric adenotonsillectomy. Post-operative pain is significant regardless of the method used in surgery. Post-operative pain can lead to poor oral intake and dehydration and can also delay discharge. Postoperative haemorrhage is one of the most common complications associated with the surgery.

<p>Isaacson, G. (2014) Pediatric Tonsillectomy An Evidence-Based Approach, Otolaryngol Clin AM 47, pp.673-690 Retrieved from ClinicalKey.com.au</p>	<p>II</p>	<p>Time Contingent pain medication has advantages in controlling post-tonsillectomy pain during the first week after surgery, Children should be cautioned to avoid sharp edged food, to avoid vigorous activity and to remain near a hospital equipped to treat post tonsillectomy bleeding during the healing phase. Good hydration improves recovery</p>
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