

General and Thoracic Surgery

General and Thoracic Surgery

Telephone Numbers:

To schedule surgery: 202-476-2151

Administration: 202-476-2151

Consults: 202-476-2150

Clinic Appointments: 202-476-2150

Administration Fax: 202-476-4174

Evenings and Weekends: 202-476-5000

(ask for surgical resident on call)

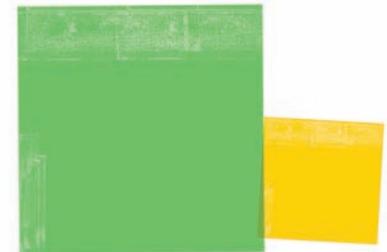
Clinic Fax: 202-476-2797

Anthony Sandler, MD, Chief

The Division of General and Thoracic Surgery encompasses elective, trauma, and emergency surgery programs. Children's National performs nearly 4,000 procedures each year on infants, children, and adolescents, including hernia repair and orchiopexy; biopsy; correction of neonatal surgical conditions; correction of biliary atresia; correction of portal hypertension; renal transplantation; intersex procedures; tumor procedures; procedures for disorders and abnormalities of the esophagus and trachea; correction of liver disorders; surgical treatment of burns; correction of congenital anomalies of the chest and abdomen; and laparoscopic, thoroscopic, and laser procedures.

Children's family-centered approach to caring for children has grown to become one of the most experienced and respected pediatric surgical programs in the world.

Children's team of pediatric general surgeons are joined by nurse practitioners and other healthcare professionals to deliver the highest quality and most technically advanced surgical care available for children.



| Diagnosis/Symptom | Initial Work-Up | Referral When | Data Needed |
|---|--|---|---|
| <p>Cholelithiasis Right upper quadrant pain</p> | <ul style="list-style-type: none"> ■ Abdominal ultrasound | <ul style="list-style-type: none"> ■ Any right upper quadrant pain with gallstones on ultrasound | <ul style="list-style-type: none"> ■ Clinic notes ■ Laboratory evaluation |
| <p>Gastroesophageal Reflux</p> | <ul style="list-style-type: none"> ■ Medical and expectant management ■ Gastroenterology referral | <ul style="list-style-type: none"> ■ Failure of medical management ■ Complicated GERD with respiratory symptom or infections ■ Growth failure ■ Esophagitis/Hiatal Hernia | <ul style="list-style-type: none"> ■ Clinic notes ■ Imaging studies ■ Endoscopy reports ■ pH probe results if available |
| <p>Inflammatory Bowel Disease Crohns Disease Ulcerative Colitis</p> | | <ul style="list-style-type: none"> ■ Failure of medical management | <ul style="list-style-type: none"> ■ Clinic notes ■ Contrast studies ■ Current medication list |
| <p>Inguinal Hernia/Hydrocele</p> | <ul style="list-style-type: none"> ■ Physical exam ■ May require ER visit if incarceration suspected | <ul style="list-style-type: none"> ■ Upon identification | <ul style="list-style-type: none"> ■ Clinic notes |
| <p>Pectus Carinatum A protrusion of the chest wall. Can be asymptomatic or have symptoms such as chest pain or diminished exercise capacity</p> <p>Pectus Excavatum A depression of the chest wall. Can be asymptomatic or have symptoms such as chest pain or diminished exercise capacity</p> | <ul style="list-style-type: none"> ■ Chest x-ray | <ul style="list-style-type: none"> ■ Symptoms ■ Family education and options | <ul style="list-style-type: none"> ■ Clinic notes ■ Imaging studies ■ Cardiology and pulmonology notes if available |

| Diagnosis/Symptom | Initial Work-Up | Referral When | Data Needed |
|---|---|--|--|
| Perianal/Perirectal Abscess | <ul style="list-style-type: none"> ■ Physical exam ■ Antibiotics ■ May need incision and drainage | <ul style="list-style-type: none"> ■ Failure to heal ■ Recurrence | <ul style="list-style-type: none"> ■ Clinic notes |
| Pilonidal Cyst/Abscess | <ul style="list-style-type: none"> ■ Antibiotics ■ Personal hygiene ■ Perineal, sacral shaving ■ Keep area clean and dry ■ May require urgent drainage in emergency department | <ul style="list-style-type: none"> ■ Upon identification | <ul style="list-style-type: none"> ■ Clinic notes |
| Splenomegaly/Hypersplenism Hereditary spherocytosis Sickle Cell Anemia Idiopathic Thrombocytopenia Purpura | <ul style="list-style-type: none"> ■ Hematology consultation ■ Abdominal ultrasound | For splenectomy to reduce <ul style="list-style-type: none"> ■ Symptoms ■ Transfusions ■ Thrombocytopenia | <ul style="list-style-type: none"> ■ Clinic notes ■ Ultrasound ■ Transfusion records ■ Hematologists consult |
| Umbilical Hernia | <ul style="list-style-type: none"> ■ Physical exam ■ If incarcerated (rare) ■ Send to emergency department | <ul style="list-style-type: none"> ■ Persistent hernia in child ■ after 4-5 yrs of age ■ Large defect | <ul style="list-style-type: none"> ■ Clinic notes |
| Vascular Anomalies Hemangiomas/Lymphatic or Vascular Anomalies | <ul style="list-style-type: none"> ■ Ultrasound | <ul style="list-style-type: none"> ■ For further management and advice, contact Children's Vascular Anomalies Clinic at 202-476-2151. | <ul style="list-style-type: none"> ■ Clinic notes ■ Any imaging studies |

