

SN-5 pediatric sinonasal

symptom survey

PARENT INSTRUCTIONS: Please help us understand the impact of sinus and/or nasal problems on your child's quality of life by checking one box **x** for each question below. Thank you.

SINUS INFECTION: Nasal discharge, bad breath, daytime cough, post-nasal drip, headache, facial pain or head banging. How often a problem for your child during the past 4 weeks?									
□ None of the time	\Box Hardly any time at all	\Box Some of the time	□ Most of the time						
	\Box A small part of the time	\Box A good part of the time	\Box All of the time						
NASAL OBSTRUCTION: Stuffy or blocked nose, nasal congestion, reduced sense of smell, trouble breathing with mouth closed. How often a problem for your child during the past 4 weeks?									
None of the time	\Box Hardly any time at all	\Box Some of the time	\Box Most of the time						
	\Box A small part of the time	\Box A good part of the time	\Box All of the time						
ALLERGY SYMPTOMS: Sneezing, itchy nose/eyes, need to rub nose/eyes, or watery eyes. How often a problem for your child during the past 4 weeks?									
None of the time	\Box Hardly any time at all	\Box Some of the time	\Box Most of the time						
	\Box A small part of the time	\Box A good part of the time	\Box All of the time						
EMOTIONAL DISTRESS: Irritable, frustrated, sad, restless, or trouble sleeping. How often a problem for your child during the past 4 weeks because of nose or sinus illness?									
None of the time	\Box Hardly any time at all	\Box Some of the time	\Box Most of the time						
	\Box A small part of the time	\Box A good part of the time	\Box All of the time						
ACTIVITY LIMITATIONS: Missed school/daycare, lost time with family/friends, unable to do projects. How often a problem for your child during the past 4 weeks because of nose or sinus illness?									
None of the time	Hardly any time at all	\Box Some of the time	\Box Most of the time						
	\Box A small part of the time	\Box A good part of the time	□ All of the time						
OVERALL How would you rate your child's quality of life on a result of page or sinus problems?									

OVERALL, How would you rate your child's quality of life as a result of nose or sinus problems? (Circle one number)

	\$				(-))				
C Worst Possible Quality-of-Life)	1	2	3		5 f-way B orst and	6 etween d Best	7	8	9		Best Possible Quality-of-Life
PHYSICIAN only:												
Baseline (pre-medication) (po] Follc ost-me		ip wee ation)	k [Bas (pre-sui	eline gical)		low-up urgical)	week	[]	Score each of the 5 questions 1-7
Patient ID #												[] SN-5 Score (total sum / by 5)

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Understanding the Impact of Sinus and/or Nasal Problems on Your Child's Quality of Life.

Sinusitis is one of the most common infections in the United States. Sinusitis is an inflammation, or swelling, of the tissue lining the sinuses. Normally, sinuses are filled with air, but when sinuses become blocked and filled with fluid, germs (bacteria, viruses, and fungi) can grow and cause an infection. In children, common environmental factors that contribute to sinusitis include allergies, illness from other children at day care or school, reflux, and smoke in the environment. Acute sinusitis is a sudden onset of cold-like symptoms such as runny, stuffy nose and facial pain that does not go away after 10 to 14 days. Chronic sinusitis is a condition characterized by sinus inflammation symptoms lasting 12 weeks or longer.

Adenoids help filter out germs from your body, sometimes they can get overwhelmed by bacteria and become infected. When this happens they also get inflamed and swollen. This condition is called adenoiditis. It is difficult to distinguish between chronic adenoiditis and chronic sinusitis, since clinical symptoms and exam findings are identical.¹⁻²

How are these conditions treated?

- Both sinusitis and adenoiditis are treated with antibiotics. However, if your child has frequent infections, including ear, or antibiotics do not help, or if your child has ongoing breathing problems, surgery may be needed. Your ENT physician may recommend removing the adenoids, flushing the maxillary (cheek) sinuses with saline, and dilating the opening to the maxillary sinuses with a balloon (Balloon Sinuplasty or BSP).
 - o Together, you and your child's doctor can discuss the pros and cons of surgery and determine if it is necessary.



Adenoidectomy The adenoids can be removed through the mouth. Incisions are only made where the adenoid tissue is removed.

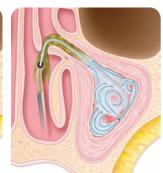


BSP Step 1 A guide is inserted through the nose and a soft flexible guidewire is inserted into the blocked sinus.

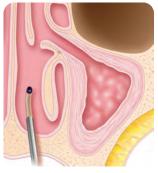


BSP Step 2

The balloon is advanced over the guidewire and is inflated to gently expand the sinus opening.



BSP Step 3 The sinus is washed out to remove mucus and the balloon is removed.



BSP Step 4 The Balloon Sinuplasty system is removed leaving the sinus open.

1 http://children.webmd.com/adenoiditis

2 http://www.webmd.com/allergies/guide/allergies-sinusitis

Balloon Sinuplasty Technology is intended for use by or under the direction of a physician. Acclarent Balloon Sinuplasty is indicated for the dilation of pediatric maxillary sinuses. Balloon Sinuplasty Technology has associated risks, including tissue and mucosal trauma, infection, or possible optic injury. Consult your physician for full discussion of risks and benefits to determine whether this procedure is right for your child. For more information on pediatric sinus care, visit www.balloonsinuplasty.com



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