**What we treat:**

Infants

Children

Adolescents

**Patient forms**

**Patient Education**

**Online Appointment**

**Patient Care Plan**

**Consultation**

Your doctor will ask detailed information about your symptoms and history of your current and past ailments and perform a thorough physical examination. Certain diagnostic tests such as blood tests or imaging tests may be ordered to confirm your condition. After reviewing these results, your doctor will recommend appropriate treatment.

It's not uncommon to have questions or doubts, which we will encourage you to clarify before you leave the clinic. Your doctor will take time to explain your options for treatment and our staff will go through the details of costs; and logistics with you. Our aim is to provide you with all the information that you would need to make informed decisions about managing your health. If you still have questions when you leave the office, please do not hesitate to contact us - we are here to help.

Diagnosis/Find Right Procedure

Timely and accurate diagnosis is the key to gaining optimal results from the treatment plan. When you present to the clinic with pain or other symptoms of injury, your doctor will review your medical history and perform a thorough physical examination with palpitation, observation of gait and with certain movements and rotations encouraged by your doctor. These will provide information about posture, gait, localization of indistinct symptoms, extent of range of motion and muscular strength.

Following this, your doctor may order imaging studies such as bone scans, CT scans, CT arthrography, MRI scans, MRI arthrography or sonography, to view the injury and disease more clearly and confirm on the diagnosis.

Treatments & Procedures

Post- Procedure Care

After the procedure, regular post-procedure follow-up visits are important to ensure your complete recovery and a successful outcome. The discharge instructions will have the periodical follow-up visits listed.

Your first visit will be scheduled 10 days to 3 weeks after the procedure. You will be required to have regular follow up visits six weeks, three months, six months, nine months and then annually to assess your recovery and progress.

Support

Appointments may be made for follow-up visits or new problems that you may be experiencing.

If you wish to schedule an appointment, please call 02 9635 5325.

**SERVICES**

NEONATAL CONSULTATION

GENERAL PAEDIATRIC CONSULTATION

PAEDIATRIC SURGERY

**Total Care**

**Total Dedication**

**Total Professionalism**

Total Paediatric Surgery are a team of dedicated paediatric surgeons providing excellent quality care for both private and public patients. We focus on forging decision-making partnerships so that you feel empowered and well equipped to make the best choices for your child’s care and treatment.

Parenthood is a joyous and challenging responsibility. It can be the happiest and most rewarding time of your life but daunting if you are worried about your child’s health. At Total Paediatric Surgery we share a passion for paediatric surgery that inspires everything we do. Knowledge, care and compassion are integral to our child-centered focus.

**Our Philosophy and Values**

Our Vision

A team of dedicated surgeons working together to ensure the best outcome for your child. Your child’s care will be allocated to the best person for your child’s needs within our surgical team. You will have peace of mind with continuity of care by a highly skilled and specialized team, for both public and private patients.

Our Mission

To provide accessible, prompt, exceptional and compassionate surgical care to children.

Care and Dedication

Our team is proud of our family centred approach. We understand your stresses and seek to provide confidence and comfort in our care to your child through education, dedication and technically excellent service.

Accessibility

As a team we are able to provide continuous care. While you will primarily be cared for by one surgeon our teamwork ensures that should they be unavailable another member of the team can ensure prompt accessible care.

Technological Innovation

All of our team use advanced minimally invasive techniques to minimize the future impact of your child’s surgery. We continue to enhance these techniques. We have travelled to other centers to perform surgery and have received many interstate and overseas patients due to this unique skill set.

Teamwork

We have a team approach and often consult and confer with each other regarding unusual or complex conditions. For difficult cases we ensure that at least two surgeons within our team are present for your child’s surgery. The specialist anaesthetist who administers anaesthesia for your child’s surgery is a critical member of the surgical team. As such only anaesthetists with extensive training and practice within paediatric anaesthesia will care for your child. Finally we recognize the child and their family as integral members of our team.

Teaching

All our team members are actively involved in both undergraduate and post graduate teaching through the University of Sydney and the Royal Australasian College of Surgeons. We believe in progressing our specialty through teaching and research and as a group have authored in excess of 80 publications in major paediatric surgical textbooks and peer reviewed journals. We are regularly invited to give lectures both nationally and internationally.

Procedures:

<https://www.drgideonsandler.com/procedures/#paediatric>

**EXCELLENCE IN PAEDIATRIC CARE**

Dr Shaiful is a qualified Paediatric Surgeon in Dhaka specialising in the treatment of infants, children and adolescents.

Dr Shaifulprovides a precise and measured approach to her young patients who are still growing and developing, Dr Shaiful’s advanced surgical training, knowledge and skill set enable her to recognise and treat complex surgical problems.

Dr Shaifulalso provides antenatal counselling to families with foetal anomalies.

Dr Shaifuloffers the highest level of care for all children, with a focus on personalising the healing journey for families.

Dr Shaifulbelieves in full transparency and is always happy to talk to parents, and/or their physicians if they have any concerns.

Operations

The operations listed here are amongst some of the most common operations carried out around the world.

Each operation is described, as well as what to expect after the procedure. Possible risks and complications are also detailed – but remember, an operation is only recommended when the benefits are deemed to outweigh the risks. This is always based on an individualised assessment.

If your child has been scheduled for an operation by Dr Shaifuland you have any questions whatsoever, please do not hesitate to contact us.

Aftercare

Although each child has a different experience with their operation and recovery, there are some predictable patterns with what to expect after an operation.

Answers to questions regarding how much pain to expect, how long to wait before resuming normal activities, and what medications may be required can be found here.

As always, if you have any questions, please don’t hesitate to contact Dr Shaiful’s office.

Information

We hope that this website will provide you with information that will guide you regarding various paediatric surgical conditions and treatments.

However, as always, the information contained within this website is to be used as just that – a guide only. For advice regarding specific conditions, you should talk this over with your family doctor and if appropriate contact Dr Shaiful’s rooms to make an appointment.

Before an Operation

An operation can be a worrying event for any child (and their parents!) and we are passionate about providing care that puts your child at ease and always considers the individual needs of your child.

There are a number of issues to consider before an operation. This section contains information that guides parents through the process once an operation has been recommended, so that you and your child can be well prepared for their operation.

**What we Treat**

**General Pediatric Surgery**

Prenatal Diagnosis & Counseling

Neonatal Surgery

Sepsis & Related Conditions

Nutritional Support in Pediatric Surgical Patients

Lipoma

Sebaceous Cyst

Abscess

Corn

Dermoid Cyst

**Trauma**

Thoracic Injury

Abdominal Trauma

Genitourinary Tract Trauma

Musculoskeletal Trauma

**Major Tumors of Childhood**

Wilms’ Tumor

Neuroblastoma

Liver Tumor

Gastrointestinal Tumor

Rhabdomyosarcoma

Other Soft Tissue Tumor

Teratoma

Other Germ Cell Tumors

Hodgkin Lymphoma

Non-Hodgkin Lymphoma

Ovarian Tumors

Testicular Tumors

Adrenal Tumors

Tumors of the Chest Wall

**Head and Neck**

Lymph Node Disorders

Neck Cysts & Sinuses

Thyroglossal Cyst/ Fistual

Ranula

Tongue Tie

Branchial Cyst/ Sinus/ Fistula

Torticollis

Mucous Cyst

Cleft Lip/ Palate

Cystic Hygroma

**Thorax**

Disorders of the Breast

Congenital Chest Wall Deformities

Congenital Diaphragmatic Hernia

Eventration

Tracheo Esophageal Fistula

Disorders of Esophageal Function

Gastroesophageal Reflux Disease

Esophageal Atresia

**Vascular**

Haemangioma

**Abdomen**

Acute Abdomen

Disorders of Umbilicus

Congenital Defects of the Abdominal Wall

Inguinal Hernias

Hydroceles

Undescended Testis

Testicular Torsion

Varicocele

Hypertrophic Pyloric Stenosis

Peptic Ulcer Disease

Duodenal Atresia & Stenosis

Annular Pancreas

Jejunal Atresia & Stenosis

Meconium Ileus

Meckel Diverticulum

Intussusception

Malrotation of Gut

Intestinal Obstruction

Short Bowel Syndrome

Gastrointestinal Bleeding

Alimentary Tract Duplication

Mesenteric Cysts

Omental Cysts

Polypoid Disease of the Gastrointestinal Tract

Necrotizing Enterocolitis

Crohns’s Disease

Ulcerative Colitis

Peritonitis

Stomas of Small and Large Intestine

Intestinal Atresia & Stenosis

Appendicitis

Hirschsprung Disease

Anorectal Malformation

Jaundice in Children

Biliary Atresia

Choledochal Cyst

Gallbladder Disease

Hepatic Infections

Portal Hypertension

Pancreatic Disease

Surgical Diseases of the Spleen

Fecal Incontinence

Constipation

Per-rectal Bleeding

Omphalocele/Exomphalos

Gastroschisis

Achalasia

Vitellointestinal Duct Anomalies

Rectal Polyps

Rectal Prolapse

Anal Fissure

Fistula

Hemorrhoids

Sacrococcygeal Teratoma

**Genitourinary Disorders**

Renal Diseases

Ureteropelvic Junction Obstruction

Vesicoureteral Reflux

Urinary Lithiasis

Ureteral Duplication & Ureteroceles

Disorders of Bladder Function

Megaureter

Urinary Tract Infections

Prune Belly Syndrome

Bladder & Cloacal Exstrophy

Hypospadias

Urethral Abnormality

Penile Abnormality

Scrotal Abnormality

Disorders of Sexual Development

Abnormalities of the Female Genital Tract

Posterior Urethral Valve

Acute Urinary Retention

Dribbling of Urine

Urinary Incontinence

Bed Wetting

Epididymoorchitis