Introduction

This pathway was developed by an interdisciplinary clinical team from SickKids using research knowledge, clinical experience, and consensus agreement. This is a general guideline and does not represent a professional care standard governing providers’ obligations to patients.

Target Audience:

- **Inclusion:** Children aged 2-18 years old with no underlying disease or comorbidity who have been required to have a laparoscopic splenectomy by the General Surgery Team.

- **Exclusion:**
  - Patients are to be removed from this pathway if there are significant underlying disease, significant postoperative complications (e.g. bowel obstruction or prolonged TPN) or a change in diagnosis; and
  - If a patient has Sickle Cell Disease please consult hematology for guidance on fluids, oxygen, and pain management. These patients are pre-admitted the day before surgery*

  - Care should be revised to meet individual patient needs.

Target Users:

- Surgeons, Nurse Practitioners, residents, fellow, and nurses on ward.
## Laparoscopic Splenectomy Care Pathway

### Expected Date of Discharge:

<table>
<thead>
<tr>
<th>Phase</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>PRE-OPERATIVE</strong></td>
<td></td>
</tr>
<tr>
<td>1.</td>
<td>Hydration maintained</td>
</tr>
<tr>
<td>2.</td>
<td>Adequate pain control</td>
</tr>
<tr>
<td>3.</td>
<td>Patient prepared for OR</td>
</tr>
<tr>
<td>4.</td>
<td>Child/childcare are arrived at pre-op bath. Wipes to be used upon arrival. Refer to procedure document</td>
</tr>
<tr>
<td><strong>IMMEDIATELY POST-OPERATIVELY</strong></td>
<td></td>
</tr>
<tr>
<td>1.</td>
<td>Alkaline</td>
</tr>
<tr>
<td>2.</td>
<td>Adequate pain control</td>
</tr>
<tr>
<td>3.</td>
<td>Antibiotics as tolerated</td>
</tr>
<tr>
<td>4.</td>
<td>Able to tolerate clear liquids (immediately post-op)</td>
</tr>
<tr>
<td>5.</td>
<td>Incision irrigated, no drainage, dry and intact</td>
</tr>
<tr>
<td><strong>POST-OP #1</strong></td>
<td></td>
</tr>
<tr>
<td>1.</td>
<td>Alkaline</td>
</tr>
<tr>
<td>2.</td>
<td>Adequate pain control</td>
</tr>
<tr>
<td>3.</td>
<td>Ambulation</td>
</tr>
<tr>
<td>4.</td>
<td>Able to tolerate diet</td>
</tr>
<tr>
<td>5.</td>
<td>Incision dry &amp; intact</td>
</tr>
</tbody>
</table>

### PHYSICAL EXAM

- Obtain history
- Complete physical exam
- Assess vital signs
- Complete pain assessment (refer to Pain Assessment Guidelines)
- Obtain accurate in and out

### INTRAVENOUS FLUIDS

- Ensure that patient is NPO
- Administer 0.9 NaCl with 20mmol KCL/L all maintenance
- Infuse as indicated
- Refer to Fluid and Electrolyte Guidelines

### LABS & IMAGING

- Complete CBC with differential
- Cross and type
- Ensure investigations are complete: Smartphone presence, Rh blood group, and Hemophilia screen.
- Complete labs as clinically indicated
- IV morphine as indicated
- If patient reflects adequate hemoglobin
- Administer IV antibiotics (Cefazolin) until tolerating regular diet, then switch to Penicillin VK (unless drug allergy and consult Hematology)
- If on morphine, wear off
- If paracetamol, administer acetaminophen as indicated
- Laparoscope as needed for paracetamol
- Continues IV antibiotics (Cefazolin) until tolerating regular diet, then switch to Penicillin VK (unless drug allergy and consult Hematology)

### ACTIVITY & EDUCATION

- Activity: as tolerated
- Consent for surgery
- Review pre-op procedures for child and caregiver
- Educate family about post splenectomy risks
- Review need for mobility
- Review need for parental involvement in care
- Activity: out of bed by 6am
- When diet will be started
- Review need for pain management
- Review need for mobility
- Review need for parental involvement in care

### DISCHARGE

- 1. Alkaline
- 2. Adequate pain control
- 3. Antibiotics
- 4. Able to tolerate diet
- 5. Incision dry and intact
- 6. Child/childcare teaching completed
- 7. Family understands discharge teaching

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**Guideline Group and Reviewers**

### Guideline Group Membership

1. Monping Chiang RN (EC), MS, FNP General Surgery
2. Fatma A. Rajwani PT, Quality Analyst, Quality Management Department

### Internal Reviewers

1. Annie Fecteau, MD Chief of General and Thoracic Surgery

### External Reviewer

1. Sharifa Himidan MD North York General Hospital

### Implementation Plan

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• Education and awareness building by General Surgery Program (Surgeons, NPs, fellows, nurse educator) at: fellow orientation (once per year) nursing orientation (every 3 months), and residents orientation (every month).
• Surgeons to communicate any updates in practice to Division of General Surgery.

References


Attachments:

Lap_spleen_final_2019.pdf