Laparoscopic Splenectomy Care Pathway

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>PRO-OPERATIVE</th>
<th>IMMEDIATELY POST-OPERATIVELY</th>
<th>POST-OFF DAY #1</th>
<th>DISCHARGE</th>
</tr>
</thead>
<tbody>
<tr>
<td>3. Patient prepared for OR</td>
<td>3. Anticipate as tolerated</td>
<td>3. Anticipate as tolerated</td>
<td>3. Anticipate as tolerated</td>
</tr>
<tr>
<td>4. Child is ready for pre-op bath</td>
<td>4. Able to tolerate diet (immediately post-op)</td>
<td>4. Able to tolerate diet</td>
<td>4. Able to tolerate diet</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

### Medications

- Ensure that patient is NPO
- Administer C5W/0.9 NaCl with 20mEq KCL/L at maintenance
- Refer to Fluid and Electrolyte Guidelines

### Lab & Imaging

- Ensure immunoassays are complete: Staphylococcus pneumonia, meningococcal, and Haemophilus influenza.
- Complete CBC with differential
- Cross and type

### Activity & Education

- Activity: as tolerated
- Consent for surgery
- Review pre-op procedures for child and caregiver
- Educate family about post splenectomy sequel (fatigue, increased risk of infection, and spleen trauma)
- Consider medical alert bracelet

- Activity: out of bed to chair
- When diet will be started
- Review need for pain management
- Review need for mobility
- Review need for parental involvement in care

### Implementation Plan

**PRINTABLE VERSION**

**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**
• 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