1.0 Introduction

1.1 Target Population:

- This pathway is for use with children aged 2-8 weeks old with no underlying disease or comorbidity who have been diagnosed with hypertrophic pyloric stenosis by the General Surgery Team who require open or laparoscopic pyloromyotomy.
- Patients are to be removed from this pathway if there are significant postoperative complications for example bowel obstruction or prolonged TPN; or a change in diagnosis.

1.2 Target users:

- Surgeons, medical trainees (residents and fellows), Nurse Practitioners, and bedside nurses.
2.0 Guideline

### Hypertrophic Pyloric Stenosis Care Pathway

#### Pre-operative

1. Hydration maintained
2. Electrolyte correction
3. Patent prepared for OR
4. Child and family to complete pre-op bath (shower provided upon arrival).

#### Recovery

1. Activite
2. Adequate pain control
3. Antibiotics
4. Able to tolerate diet
5. Injuries dry and intact
6. Child caregiver teaching completed
7. Family understands discharge teaching

#### Expected Date of Discharge

- 1. Activite
- 2. Adequate pain control
- 3. Antibiotics
- 4. Able to tolerate diet
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- 6. Child caregiver teaching completed
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#### Expected Date of Discharge

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<tr>
<th>Goals</th>
<th>Pre-operative</th>
<th>Recovery</th>
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### Physical Exam

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

### Oral Care

- Ensure NPO
- Set NG tube to low intermittent suction
- Administer D5W 0.9% NaCl at maintenance
- Administer oral electrolytes (K+, Na+, Mg2+, Ca++, PO4-3) to maintain electrolyte balance
- Complete CBC and differential
- Order electrolytes (K+, Na+, Mg2+, Ca++, PO4-3, urea, creatinine)

### Lab & Medications

- Complete labs as indicated
- Ensure adequate pain control
- If patient is on analgesics, administer acetaminophen
- If signs of wound infection, assess need for antibiotics (refer to Antibiotic Guidelines)
- Review incision care: review intravenous in until they fall off or remove after 14 days, and gently wash incision with soap and water
- Review signs and symptoms of wound infection: fever, redness around incision, drainage from incision, increased pain around incision
- Review bathing & i.e. may bathe 48 hours after surgery
- Review when to call surgeon’s office: wound infection, increased in wound, increase in wound, increased pain around incision

### Education

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### Printables

- Hypertrophic Pyloric Stenosis Pathway
- Post-op Feeding Algorithm

### References

9. Children’s Hospital Central California Pyloric Stenosis Surgical Pathway
10. University of Maryland Medical Systems Physician Order Sheet – Pyloric Stenosis

4.0 Guideline Group and Reviewers

Guideline Group Membership

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3. Anna Polanski, NP General Surgery
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Internal Reviewers

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Attachments:

py stenosis_final_2019.pdf

Pyloric Stenosis Post-op Feeding Algorithm.pdf