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

Expected Date of Discharge:

**PRE-OPERATIVE**
- Goals
  - Obtain history
  - Complete physical exam
  - Obtain weight and height
  - Assess vital signs
  - Complete pain assessment (refer to Pain Assessment Guidelines)

**PHYSICAL EXAM**
- Ensure NPO
- Set NG tube to low intermittent suction
- Administer D5W 0.9% NaCl with 20mM KClL at maintenance rate or as indicated
- Refer to Fluid and Electrolyte Guidelines

**POST-OP**
- Administer D5W 0.9% NaCl with 20mM KClL at maintenance rate or as indicated
- Refer to Fluid and Electrolyte Guidelines

**POST-OP FEEDING**
- Ensure infant has adequate pain control
- Monitor vital signs as per OR
- Obtain nasogastric output
- Complete wound assessment
- Obtain daily weights
- Remove surgical dressing and sterile dressings

- Complete pain assessment every 4 hours
- Ensure infant has adequate pain control (refer to Pain Management Guidelines)
- Monitor vital signs as per OR
- Obtain nasogastric output
- Complete wound assessment
- Obtain daily weights
- Remove surgical dressing and sterile dressings

** Hướng dẫn của bệnh hypertrophic pyloric stenosis**

**Expected Date of Discharge:**

- Activity
- Adequate pain control
- Analgesia
- Able to tolerate diet
- Infusion site dry and intact
- Infant caregiver teaching completed
- Family understands discharge teaching

Printable versions of:

Hypertrophic Pyloric Stenosis Pathway
Post-op Feeding Algorithm

3.0 References


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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

1. Monping Chiang, NP General Surgery
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3. Anna Polanski, NP General Surgery
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Internal Reviewers

1. Jacob Langer MD

Attachments:

py stenosis_final_2019.pdf
Pyloric Stenosis Post-op Feeding Algorithm.pdf