

**LIFEHOUSE GYNAECOLOGICAL ONCOLOGY GROUP
LAPAROTOMY FAST TRACK-ERAS
PERIOPERATIVE CARE PROTOCOL**

PREADMISSION

Specialist Nurse Instruction
Provide Patient Information Brochure (PIB)
Commence D/C Planning
Bowel Prep (Selected cases only)
VTE Instruction

PRE & INTRAOP

Gabapentin 600mg PO in PAU
Bair-Hugger
IV COX Inhibitor (Paracoxib)
IV Paracetamol
TAP Block
VTE Prophylaxis

DAY 0

Fluids/Diet as tolerated PO
PCA
PONV Protocol
FBC/UEC 4 hrs post op
VTE Prophylaxis

DAY 1

FBC/UEC
VTE prophylaxis
Analgesia
After Review:
If appropriate cease PCA (2 hours after "Strong Analgesia" given)
IV down/cap cannula
IDC out as directed by Team
Confirm passed urine after 4 hours with bladder scan (refer Post Op Voiding Protocol)
Shower
Sit out of bed AM and PM
Incentive Spirometer x6/hour
Diet as tolerated

DAY 2 and 3

FBC/UEC
VTE prophylaxis
Continue active mobilisation
Continue Incentive Spirometer
Diet as tolerated
Coloxy & Senna or Movicol
Analgesia

CRITERIA FOR DISCHARGE

Tolerating diet
Pain controlled with oral analgesia
Mobilising without assistance
Adequate home supervision

DAY 2 POST DISCHARGE

Phone call from Specialist Nurse or Fellow

1 WEEK POST OP

Attend Nurse Led Follow Up Clinic

2 WEEKS POST OP

Attend clinic for post op visit

Bowel Preparation

Not routine
See Fasting and Bowel Preparation Instructions

VTE Prophylaxis

Preop
Clexane 20mg SCI
Intraop
TED Stockings & Sequential Compression Devices
Postop
Clexane 20mg SCI post op D0
TED Stockings & Sequential Compression Devices
Fraxiparine 2850 IU SCI or
Clexane 20-40mg SCI daily.
Extended prophylaxis in selected high risk patients.

Nausea & Vomiting

PONV Protocol

Laxatives

Coloxyl with Senna 2 nocte or
Movicol 2 sachets daily

Notify RMO/Registrar/Fellow

T > 38⁰
P > 120
BP <100 or >160 mmHg systolic
Urine output <30 ml/hr
Has not passed urine 4 hours after catheter removed

Analgesia

Paracetamol: 1000mg q6h
Meloxicam: 15mg daily x3 days (avoid or decrease dose to 7.5mg in elderly, HT, ACE inhibitor, increased creatinine)

Strong Analgesia

Oxycodone (Endone): 5-10mg q4-6 hr prn
Tramal: 50-100mg q6-12h PO/IM
Targin: 5/2.5; 10/5: BD
Tapentadol SR: 50-100mg BD
Tapentadol IR: 50mg q6hr
Zaldiar ii tabs TDS

Discharge Orders

Paracetamol 1000mg QID
Coloxyl & Senna 2 nocte (or Movicol 2 sachets nocte)
Plus "Strong Analgesia"
Dressing to be removed as directed by doctor or specialist nurse
Follow up appointment made
D/C Summary completed
Post Discharge Care Instruction information given to patient
TED stockings worn for 4 weeks
Extended VTE prophylaxis in selected high risk patients