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**Preoperative**

**Pre-Operative Medications & Instructions:**

- Patient to drink carbohydrate-rich drink up to 2 hrs before surgery
- Midazolam per anesthesia team
- Consider placing PIV in Same Day Surgery if consented for spinal

**Prior to Surgery Patient/Family Meets:**

- Pre-op nurse
- Anesthesiologist
- Surgeon
- Child Life Specialists

**Intraoperative**

**Multimodal Analgesia:**

- **Acetaminophen** 10 - 15 mg/kg IV (max 1000 mg)
    - Administered at beginning of case
  - **Ketorolac** 0.5 mg/kg IV (max 30 mg)
    - Administered at end of case
    - Discuss with surgeon prior to administration
  - **Fentanyl** PRN
  - **Hydromorphone** PRN
    - Aim to limit long acting opioids
  - **Dexmedetomidine** PRN
- Surgeon will infiltrate the surgical site with 20 - 30 ml of local at the end of the case

**Regional/Neuraxial Anesthesia:**

*\*Please involve an APS physician\**

- Discuss with surgeon at huddle
  - Specifically predicted length of surgery
- Primary choice - neuraxial**
- Ensure patient meets inclusion criteria
  - Provide sensory + motor blockade
  - Procedure site should be at L 3/4 or L 4/5
  - Utilize hyperbaric solution of 0.75% bupivacaine in 8.25% dextrose
    - Suggested dose 12.5 - 15 mg (1.7 - 2 ml)
    - Expected onset 5 - 8 minutes
    - Expected duration 90 - 150 minutes
  - Utilize 25 - 27 gauge spinal needle (Whitacre with pencil point)
  - Patient to stay seated for 1 minute to allow block to set up
  - *If done in lateral position, ensure operative hip is down*
- Secondary choice - peripheral nerve block**
- Pericapsular nerve group (PENG)
  - Quadratus Lumborum
  - Fascia Iliaca
  - Lumbar Plexus Nerve block

**Antibiotics:**

- Discuss at huddle and administer prior to incision
- Antiemetics:**
- **Dexamethasone** 8-10 mg IV (max 12 mg)
  - **Ondansetron** 0.15 mg/kg IV (max 4 mg)
- Tranexamic Acid:**
- 2 grams split during case
    - 1 gm prior to surgical incision
    - 1 gm during closure

**Maintenance of Anesthesia:**

- **Volatile or TIVA** maintenance at discretion of anesthesiologist
  - **Propofol** infusion 100 - 150 mcg/kg/min
  - *Only if working spinal anesthetic*
- **Normothermia:**
  - Utilize Bair Hugger
  - Goal intraoperative temperature 36° - 38° C
- **Euvolemia:**
  - Goal is clinical euvolemia; Plasmalyte at 3-7 ml/kg/hr (additional as clinically indicated)

**Postoperative - PACU**

**PACU Orders:**

- Fentanyl 0.5 mcg/kg IV q5 min PRN pain
- Diazepam 0.05 - 0.1 mg/kg (max 5 mg) IV x 1 PRN muscle spasm
- Hydromorphone 5 mcg/kg IV q8 min PRN pain

**Neuraxial Anesthesia Criteria**

- **Inclusion:**
  - Patient consent, surgery below the umbilicus requiring motor and sensory blockade
- **Exclusion:**
  - **Absolute contraindications:** Patient refusal, systemic infection or infection at the site, history of bleeding disorder (hemophilia, thrombocytopenia, etc.), patients on anticoagulant therapy (warfarin, heparin, etc.), allergy to medications, inability to cooperate or position for the procedure, conditions that increase intracranial pressure (brain tumor, trauma, intracranial bleed), uncorrected hypovolemia.
  - **Relative contraindications:** Pre-existing neurological disease such as multiple sclerosis, neuropathy, spinal cord disease, extreme obesity, cognitive impairment, aortic stenosis or a fixed cardiac output, severely uncontrolled hypertension, scoliosis or history of spinal surgery.