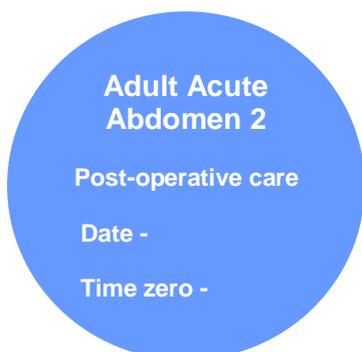


Name -	DOB -	Hospital number -
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Adult Acute Abdomen Pathway 2 - post-operative assessment and care

Action	Date and time	Name	Timeline
Time surgery completed	dd/mm/yy - hh:mm	MRCS	0 hrs
P-POSSUM predicted mortality %	dd/mm/yy - hh:mm	MRCS	
Risk assessment for admission to ICU/HDU Any of the following - <ul style="list-style-type: none"> P-POSSUM predicted mortality > 10% 1 acute organ dysfunction/failure Dialysis dependent patients Massive transfusion (TRALI risk) Open abdomen (laparostomy) Lactate ≥ 4mmol/L Oxygen P/F ratio <30kPa Persistent hypothermia despite active warming in recovery (core temp < 36⁰c). 	dd/mm/yy - hh:mm	MRCS	
High risk requiring admission to Critical Care (as above)			
Discussion concerning admission to Critical Care between consultant surgeon, consultant anaesthetist, and consultant for Critical Care (towards the end of surgery).	dd/mm/yy - hh:mm	FRCA	
Time of admission to Critical Care (within 4hrs of decision).	dd/mm/yy - hh:mm	Critical Care Trainee	4 hrs
Ward care post-operatively			
Patient arrives on ward.	dd/mm/yy - hh:mm	Ward nurse	0 hrs
Activate Patientrack post-operative monitoring with 1 hourly observations until review by senior surgeon.	dd/mm/yy - hh:mm	Ward nurse	
All patients - <ul style="list-style-type: none"> Antibiotics depending on surgical diagnosis (see Prescribing Guidelines for Emergency Laparotomy) DVT prophylaxis Continuous fluid balance monitoring Daily biochemistry and haematology until stepped down in frequency by senior review Individual pain regime Chest physiotherapy and mobilisation regime Nutritional regime. 	dd/mm/yy - hh:mm	MRCS	
Review by senior surgeon within 12hrs.	dd/mm/yy - hh:mm	MRCS	12 hrs



Adult Acute Abdomen 2 - post-operative assessment and care

Instructions

1. Enter patient details and fill in box A.
2. Detach large square sticker, place in clinical notes, and follow pathway.
3. Detach round sticker and place on front of notes folder.
4. File this backing sheet (with patient details) in designated audit tray.