



# Acute Abdomen Pathway

***This pathway is to be commenced at initial patient assessment by A&E team OR General Surgery Team (whichever assesses the patient first) when an acute abdomen is suspected. General Surgery team to ensure page 1 fully filled out prior to CEPOD booking.***

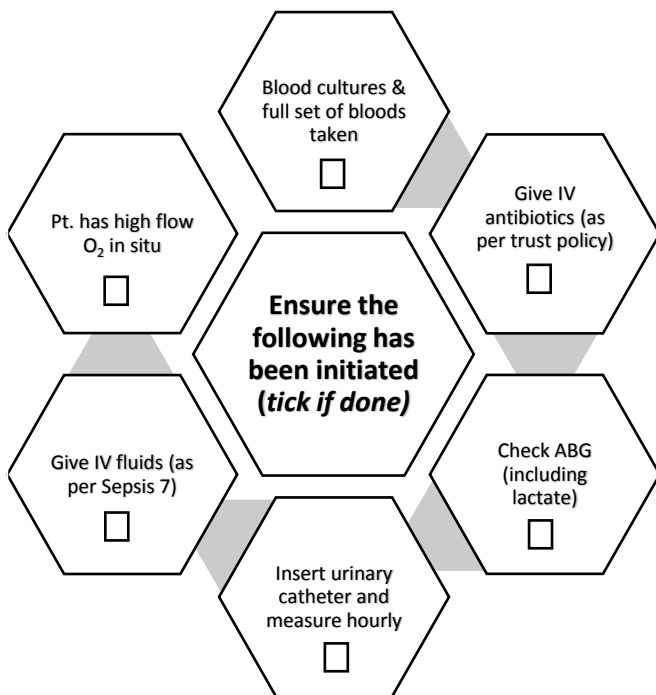
*Please affix patient label*

Date of admission to hospital:.....

Time of admission to hospital:.....

Is the patient septic as per EKHUFT septic screen tool?                      **YES**                      **NO**                      (circle)

If septic implement Sepsis 7 bundle IMMEDIATELY (see EKHUFT A&E Observation Chart)



- Time of blood and blood culture sent  
.....
- Time of first antibiotic  
.....
- Blood lactate  
.....

Preliminary diagnosis  
.....

**NOTE: WITHOUT SIDE 1 OF THIS FORM FULLY FILLED OUT AND A PRE-OPERATIVE POSSUM SCORE THE PATIENT WILL NOT BE ACCEPTED FOR SURGERY**

### CT SCANNING

**CT requested?**  
Time.....  
Date.....

**CT performed?**  
Time .....

Date .....

**Diagnosis?**  
.....  
.....

### DECISION TO OPERATE

**Laparotomy required?**  
Yes No

**Decision made by?**  
.....

**Time of decision**  
.....

### SENIOR INVOLVEMENT

**Consultant surgeon involved?**  
Name.....  
Time.....

**Consultant anaesthetist involved?**  
Name.....  
Time.....

### THEATRE PLANNING

**Time & date booked for theatre**  
.....

**NCEPOD Category**

1. Immediate   

2 a. <6 hours   

2b. <24 hours   

3. Expedited   

4. Elective



# Acute Abdomen Pathway

***Intra & post-operative sections below to be filled in by anaesthetic team***

**Intra-operative**

- Reason for any delay
  - .....
- Time into anaesthetic room
  - .....
- Consultant present in theatre
  - Anaesthetic consultant
    - Yes  No
  - Surgical consultant
    - Yes  No
- Reason for consultant absence?
  - .....
- NELA data completed?

**Intra-operative**

- Intra-operative antibiotics given?
  - Yes  No
- Vascular access
  - CVP Yes  No
  - Arterial line Yes  No
- Cardiac output monitoring (GDFT)
  - Yes  No
- Type of CO monitoring
  - .....
- IV fluids (specify amount given)
  - Crystalloids .....
  - Colloid .....
  - Blood .....
- Estimated Blood Loss .....

**Post-op POSSUM score** [www.riskprediction.org.uk](http://www.riskprediction.org.uk)
**Mortality %**
**Morbidity%**

**Post-operative management plan**

- Post op care
  - Level 3                       Level 2                       Extended recovery                       Ward
  - *P-POSSUM scores of  $\geq 5\%$  mortality merits a request for Level 2 or 3 post-operative care*
  - *Patients discharged to surgical ward **MUST** be referred to critical care outreach team*

Post-operative parameters

- MAP    Aim:
- PaO<sub>2</sub>    Aim:
- Fluid rate    ml/hr:
- Goal directed fluid therapy                      Yes                       No                       Method:
- Analgesia plan (*circle*)                      PCA    Epidural                      Spinal    TAP blocks
- Other.....
- Antibiotic instruction:                      Agent(s).....                      Duration:.....
- Nutritional instruction:
  - Enhanced recovery                      Yes                       No
  - Enteral feed                      Yes                       No                       Specify:.....
  - Parental feed                      Yes                       No                       Specify:.....