

UCSF Gyn Onc Enhanced Recovery Pathway

		ANESTHESIA	GYN ONC	NURSING	PATIENT
DAYS B4	PREPARE	Phone Consult or Appointment	Informed consent.	TUG assessment	Enroll in MyChart
		Provide pre-op instructions via MyChart or mail	Patient education, expectations management, Exercises for Recovery, Consider Surgical Wellness		Learn about post-op goals and expectations, acquire Boost breeze and antibiotics for bowel prep as indicated. Consider Impact or other immunomodulation for vulvectomy or open surgical cases
Day of Surgery / Pre-op		Pre-Op warming, PIV, LR at 30 ml/hr.	Consent checked and 24Hr H&P completed 45 minutes before OR start time	Complete Pre-Op RN checklist 45 min prior to OR start time	No food after midnight. Boost breeze or equivalent carbohydrate drink (e.g. Gatorade) and water taken up until 2 hours before arrival to hospital on day of surgery.
		Complete anesthesia assessment		Pre-Op warming, IV placed, labs drawn (if applicable), LR at 30mL/hr, ISS teaching	
	MEDICATIONS		Gabapentin 600mg once Acetaminophen 1000 mg PO once Diclofenac (eGFR>60) 100mg PO once Scopolamine (age <60) 1.5mg TD once (if > 3RFs)	Gabapentin, diclofenac & APAP given once with sip of water	Risks of surgery and anesthesia will be discussed. You will sign a consent for the procedure, and discuss the possibility of receiving blood products. You will also have the option of consenting to tissue banking.
	REGIONAL	30 min before start time, place T9-10 epidural (open cases)			
INTRA-OP	MEDICATIONS	Draw 4 purple top tubes if consented for tissue bank	ERAS TIMEOUT: Review opioid sparing strategy, PONV, SCIP measures, IVF management, need for clean closing tray (if open clean contaminated or contaminated case), tissue banking		
		Orogastric tube to low intermittent suction (laparoscopic cases)			
		Maintain patient temperature >36.0 C			
	ABX	Antibiotic: Cefazolin 2-3g IV q4			
IVF	Fluids: NTE 2L unless EBL >300mL. Use esophageal doppler or SPV (+ a-line) to guide resuscitation.				
PONV	Dexamethasone 4mg IV x 1 after induction/before incision				
	Ondansetron 4mg IV x 1				
	Propofol gtt (if > 3RFs)				
PAIN MANAGEMENT	All	Minimize opioid medications	ERAS Debrief; Post-op pain regimen, diet orders, heparin dosing		
	Lap	Lidocaine 2mg/kg/hr IV + Magnesium 30 mg/kg bolus over 30 minutes followed by 6 mg/kg/hr			
	Open	Thoracic epidural Ropiv 0.0625% + Fentanyl 2 mcg/mL @ 8 mL/hr. Lidocaine + Magnesium drips for patients who are not candidates for epidural.			
END OF CASE		Alveolar recruitment maneuver: sustained inflation by CPAP with pressures from 30 to 40 cmH2O for 30 seconds x 3 IMMEDIATELY prior to extubation (laparoscopic cases)	Request Alveolar recruitment maneuver for laparoscopic cases	Provide clean closing tray and new gloves if open case	