

## Adult (18-64 y/o) Post Operative/Procedural Discharge Protocol

<u>Procedures</u>	<u>Follow-up</u>	<u>Studies for Clinic follow-up</u>
<b>Standard Laparoscopic Procedures: no complications</b>		
Appendectomy	1-2 weeks	-
Cholecystectomy	1-2 weeks	-
Umbilical Hernia Repair	1-2 weeks	-
Inguinal Hernia Repair	1-2 weeks	-
<b>Laparoscopic Procedures: Complex or with Complications</b>		
Appendectomy	1-2 weeks	(if drains) drainage recorded
Cholecystectomy	1-2 weeks	(if drains) drainage recorded
Umbilical Hernia Repair	1-2 weeks	(if drains) drainage recorded
Inguinal Hernia Repair	1-2 weeks	(if drains) drainage recorded
<b>Open Hernia Repair</b>		
Umbilical	2 weeks	-
Ventral with drains/ vac	1 week	drainage recorded
Ventral without drains	2 weeks	-
Inguinal	2 weeks	-
<b>Exploratory Laparotomy</b>		
no drains	1 to 2 weeks	-
with drains/vac or open midline wound	1 week	drainage recorded
<b>Neck Exploration</b>		
no drains	1 to 2 weeks	-
with drains	1 week	drainage recorded
<b>Abscess Incision and Drainage</b>		
	1 week	-
<b>Status Post Chest tube placement</b>		
Pneumothorax (non-complicated)	2 weeks	CXR
Hemothorax	1 week	CXR
Hemopneumothorax	1 week	CXR
<b>VATS</b>		
VATS	1-2 weeks	CXR
Thoracotomy	1 week	CXR
Open Reduction and Internal Fixation Ribs	1 week	CXR

## Adult (18-64 y/o) Post-trauma Discharge Protocol

Traumatic Injury	Follow-up	Studies for follow-up
<b>Solid Organ</b>		
Liver $\geq$ grade 3	2 weeks	CT Abdomen if no rpt imaging before discharge.
Spleen $\geq$ grade 3	2 weeks	CT Abdomen if no rpt imaging before discharge
<b>Isolated Rib Fractures</b>	2 weeks	none
<b>Hemothorax</b> (no Chest tube)	1 week	CXR
<b>Pneumothorax</b> (no Chest tube)	2 weeks	CXR if symptomatic
<b>Laceration Repair - stitch removal</b>	1-2 weeks*	none
<b>Open Healing Wound</b>	1 week	none

\*5-7 days in low tension areas with high cosmetic importance, 7-10 days higher tension, 14 days over joint.

### References

1. Wallen, Taylor E. MD; Clark, Katherine RN, BSN; Baucom, Matthew R. MD; Pabst, Rebecca RN, BSN; Lemmink, Jennifer RN, MSN; Pritts, Timothy A. MD, PhD; Makley, Amy T. MD; Goodman, Michael D. MD. Delayed splenic pseudoaneurysm identification with surveillance imaging. Journal of Trauma and Acute Care Surgery 93(1):p 113-117, July 2022. | DOI: 10.1097/TA.0000000000003615
2. Wagner ML, Streit S, Makley AT, Pritts TA, Goodman MD. Hepatic Pseudoaneurysm Incidence After Liver Trauma. J Surg Res. 2020 Dec;256:623-628. doi: 10.1016/j.jss.2020.07.054. Epub 2020 Aug 15. PMID: 32810662.