

Norwalk Hospital Norwalk, CT ERAS Update

Alan Meinke, MD, FACS

Kathleen Gravelle, RN, BSN, MSM

November 6, 2015

ERAS Implementation

Survey the Stakeholders (Feb-Aug 2014)

Discussions with:

- Surgeons
- Hospitalists
- Anesthesia
- Nursing
- PAs
- Nutrition
- Physical Therapy
- Rehabilitation
- Pharmacy

Building the Team (Sep-Nov 2014)

Initiating members:

- Multidisciplinary
- Multispecialty

1st Meeting
November 2014

Identify ERAS Variables (Nov 2014)

Tailored to fit Norwalk
Hospital Culture:

14 Variables identified
(upgraded to 17)

Pre-OP

Intra-OP

Post-OP

Charge Team

Identify issues to
implementing variables

Suggest solutions and
tracking methods

Mid-thoracic epidural anesthesia/analgesia
No nasogastric tubes
Prevention of nausea and vomiting
Avoidance of salt and water overload
Early removal of catheter
Early oral nutrition
Non-opioid oral analgesia/NSAIDs
Early mobilization
Stimulation of gut motility
Audit of compliance and outcomes

Preadmission counseling
Fluid and carbohydrate loading
No prolonged fasting
No/selective bowel preparation
Antibiotic prophylaxis
Thromboprophylaxis
No premedication

Postoperative

Preoperative

ERAS

Intraoperative

Short-acting anesthetic agents
Mid-thoracic epidural anesthesia/analgesia
No drains

Avoidance of salt and water overload
Maintenance of normothermia (body warmer/warm intravenous fluids)

Do you know WHAT is? ENHANCED

PRE - OPERATIVE

INTRA - OPERATIVE

POST - OPERATIVE



Norwalk Health (NH)

Name: _____

Surgery: _____

Having your Surgery at Norwalk Hospital * What to Expect

Thank you for choosing Norwalk Hospital for your surgery. We are committed to providing you with the best possible surgical care using the latest technology.

This handbook should be used as a guide to help you through your surgery and recovery, and us feedback that you may have. Please give us feedback that you think would make your experience even better.



Kathleen.Gravelle@norwalkhealth.org



Do you know WHAT ERAS is?

ENHANCED RECOVERY AFTER SURGERY

PRE - OPERATIVE

PRE-HABILITATION

- PT EDUCATION (EMMI)
- MEDICAL CLEARANCE (H&P, BLOOD, EKG, NUTRITION, SMOKE, ALCOHOL)
- ABOUT YOUR SURGERY HANDBOOK
- PRE-OPERATIVE DIET:
 - CLEAR LIQUIDS UP TO 3HR AND SOLIDS UP TO 8HR BEFORE PROCEDURE
- CHLORHEXIDINE WASH (X3) BEFORE PROCEDURE

INTRA - OPERATIVE

ANESTHESIC CHOICES

- FLUID MANAGEMENT, USE OF VASOPRESSORS
- PAIN MANAGEMENT
- TEMPERATURE REGULATION, ACTIVE WARMING
- PROPHYLACTIC PROTOCOLS (VTE, ABX, N/V)
- LAPAROSCOPIC APPROACH
- DECREASED USE OF N/G (NASOGASTRIC) TUBES

POST - OPERATIVE

PREVENT POSTOPERATIVE ILEUS

- PAIN MANAGEMENT
- EARLY MOBILIZATION AND NUTRITION
- CONTROL POST-OP NAUSEA AND VOMITING (PONV)
- EARLY CATHETER REMOVAL (FOLEY AND IV FLUIDS)
- DEEP BREATHING EXERCISES
- EARLY DISCHARGE CRITERIA
- COMMUNICATION