

## Microsurgical Breast Reconstruction

## **ERAS Protocol**

| Ш | Scopolamine patch in preop holding area                               |
|---|---|
|   | IV antibiotics preop and redosing schedule                            |
|   | Euvolemia ~ 300 cc IVF per hour – alert surgeon if pressors needed    |
|   | ETT with muscle relaxant/paralytic                                    |
|   | Regional blocks once intubated – split 20 cc of Exparel into 4 blocks |
|   | o Chest – Thoracic ESP  |
|   | ○ Abdomen – TAP vs ESP vs QL3   |
|   | Propofol drip in background for antinausea (can still use gases)      |
|   | Benadryl 25 mg IV after induction                                     |
|   | Ketamine drip 0.1 mg/kg/hr – stop 2 hrs prior to extubation           |
|   | Acetaminophen 975 mg po in preop or 1 g IV at beginning of case       |
|   | Toradol 30 mg IV during anastomosis                                   |
|   | Valium 5 mg IV during anastomosis                                     |
| П | Zofran  |

## Nerve blocks if no Exparel:

| Medication                                   | Concentration | Volume (cc) |
|--|---------------|-------------|
| Normal saline                                | 0.9%          | 200         |
| Bupivacaine with<br>1:200,000<br>epinephrine | 0.25%         | 50-60       |
| Dexamethasone<br>(Decadron)                  | 4 mg/cc       | 1           |
| Dexmedetomidine<br>(Precedex)                | 100 μg/cc     | 0.5         |
| Ketorolac<br>tromethamine                    | 30 mg/cc      | 1           |