

**PRE-OP NURSE**

- All piercings removed
- All rings removed
- Chlorhexidine wipes to chest/axilla/abdomen/groin
- Mepilex on sacrum
  
- Preop antibiotics
- Lovenox 40 mg SC in thigh or arm – NOT abdomen
- Scopolamine patch behind ear

**CIRCULATING NURSE**

- Copies of checklist to nurse and anesthesia
- Copy of ERAS protocol to anesthesia
- Warm room before patient enters until all drapes applied
- Check OR table to make sure the back raises and Trendelenburg
- Underbody cardiac fluid warmer set to 102 F (if available) and lower body Bair hugger
- Fluid warmer for irrigation set to 102 F
- Foley catheter with temp probe – padded under thigh
- SCDs
- Microscope available
- SPY available
- Vioptix monitor plugged in & turned on
- Turn heels every 2 hours to prevent pressure sore
- Check wrists/hands when patient flexed for closure
- PACU or ICU postop?
- Call for ICU bed and raise back and knees to match OR table
- Review checklist with any staff switch
- Call family for updates
  - 11 am
  - 4 pm

**SURGEON**

- Patient positioning
- Remove all arm bands
- Pad all IV lines
- Surgical site preparation and draping - Chloraprep
- Debrief

**ANESTHESIA**

- All EKG leads on back
- Pulse oximeter on forehead or ear – NOT finger
- No Arterial line needed
- Prophylactic antibiotics and redosing schedule
- IV and BP cuff on unrestricted limb
- Second IV in foot – remove SCD on that side
- No pressure bag on IVF
- Euvolemia ~ 300 cc per hour
- Endotracheal intubation
- Muscle paralysis
- ESP and TAP blocks (with Exparel) once intubated – no rectus sheath block
- Communicate with surgeon if pressors needed
- Turn head every 2 hours to prevent occipital alopecia
- ICG for SPY angiography – 3 cc infusion – do not discard bottle of ICG
- Extubate deep and in flexed position
- Review checklist with any new anesthesia provider
- ERAS Protocol – see additional sheet