

# USC Keck's ERAS thoracic lung surgery inpatient pathway<sup>1</sup>

Enhanced Recovery Lung Surgery Pathway				
Any variation from pathway must be addressed during rounds.				
Inpatient Admission				
	Day 0	Day 1	Day 2	Day 3
Inpatient Teams				
Level of care	ICU/Tele	Transfer to telemetry/General Care after AM rounds	Telemetry/ General Care	Telemetry/ General Care
<b>Patient-Centered Goals:</b>	Pain/Nausea controlled per patient report			
	Sits in chair x1 and with meal, walks in hallway at least once, uses IS appropriately	Sits in chair with meals and as tolerated, walks in hallway at least three times per day, performs IS 10x/hour while awake		
		Verbalizes pain management plan	Verbalizes discharge instruction	
<b>Order Sets:</b>	Lobectomy Order Set			
<b>Patient Education:</b>	Continue home ASA through perioperative period	Home Pain Management Regimen	Thoracic Discharge Instructions	
<b>Oxygenation:</b>	Incentive Spirometer 10x per hour while awake/deep breathing exercises, oxygen therapy as needed to keep saturation great than 90%			
<b>Nutrition:</b>	Solid diet			
<b>IV Fluids:</b>	Saline lock			
<b>Symptom management:</b>	<p>Pain medications in following order: non-opioids, mild opioids, strong opioids. Use adjuncts as appropriate                      ***Patient has received liposomal bupivacaine (Exparel) block intra-op, duration of action is 48-72 hours***</p> <ul style="list-style-type: none"> <li>Acetaminophen 650 mg by mouth every six hours around the clock</li> <li>Gabapentin 300mg by mouth every 8 hours around the clock</li> <li>Toradol 15mg IV every 6 hours around the clock (Hold if Cr1.5 or GFR &lt; 66 or s/p nephrectomy) x 24</li> <li>Tramadol 50mg by mouth every 6 hours as needed for moderate pain (4-6, 10 pain scale)</li> <li>Tramadol 50mg by mouth every 6 hours as needed for severe pain (7-10, 10 pain scale)</li> <li>Morphine 2mg IV every 3 hours for breakthrough pain</li> </ul> <p>GI:</p> <ul style="list-style-type: none"> <li>Famotidine 20mg by mouth twice per day</li> <li>Ondansetron 4mg IV q 6 hours as needed for nausea</li> </ul>			
<b>Bowel Regimen:</b>	Senna 8.6mg BID, If further intervention is needed, may order any of the following per standard dosing recommendations: Milk of Magnesia			
<b>Minimum Activity Expectations</b>	Activity per Nursing Mobility Protocol			
	Out of bed to chair for all meals			
<b>DVT Prophylaxis:</b>	Subcutaneous Heparin every eight hours Sequential Compression Device on except during bathing and mobility			
<b>Anemia</b>	Goal Hemoglobin ≥ 7 and ≥ 8 for CAD			

1) Illustration simplifies the layout of the pathway excerpt for teaching purposes.

Source: Keck Hospital of USC, Los Angeles, CA.