

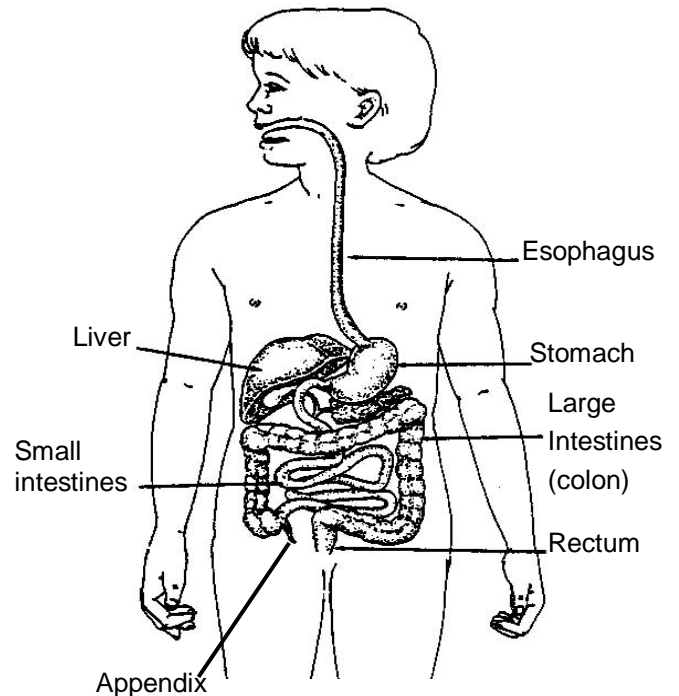


Appendectomy: Complex Appendicitis

Your child has had an appendectomy (ap pen DECK toe mee), which is the surgical removal of the appendix. The appendix is a small, narrow sac at the beginning of the large intestine (Picture 1). The appendix has no known function. Parts of your child's appendix were gangrenous (dead) or the appendix was blocked, causing it to swell and rupture (burst).

What to expect after surgery

- Your child will wake up in the Post Anesthesia Care Unit (PACU) near the surgery area. He or she may be in the PACU for 1 to 2 hours.
- After surgery, there may be a nasogastric (NG) tube in your child's nose. This tube goes into the stomach. The stomach contents are removed through the tube. This helps prevent vomiting and bloating. It allows time for the bowels to "wake up" and start working again after surgery. The tube will be removed when there are signs the bowels are working (your child passes gas, has a bowel movement or has "growling" sounds in the abdomen).
- Your child will receive needed fluids and medicines through an intravenous (IV) line. To fight infection, the child will receive antibiotics through the IV for 2 to 10 days.



Picture 1 The appendix inside the body

What to expect after surgery

- Your child will need your help and encouragement to walk and sit up in a chair after surgery. He or she may be more comfortable in bed with the head of the bed raised. Your child will need to walk at least 3 to 4 times a day to help with blood circulation, breathing, waking up the bowels and reducing prolonged pain.
- Pain medicines are often needed for the first 2 to 3 days after surgery. Non-opioid medicines will be given on a schedule for your child. A small percentage of children will require stronger, narcotic medicines to control pain. These may be given through the IV as needed while your child is not eating. Usually after the first few days, medicine will be given by mouth to control pain.
- Your child will need to cough and deep-breathe often to help keep the lungs from getting congested. He or she will be taught to use an incentive spirometer to help with the deep breathing exercises.

Blood tests (finger sticks) may also be needed to follow your child's progress.

Nutrition

- A doctor or nurse practitioner will examine your child within a day after surgery to decide if he or she is ready to start eating.
- When ready, your child will be given one meal of clear liquids, such as water, popsicles, clear soft drinks, fruit punch, gelatin, or broth.
- If your child does not vomit or have increased pain after drinking clear liquids, the next meal will be a regular meal.

Care of the incision

Open appendectomy

- Remove the dressing after 48 hours.
- If there are small strips of white tape (SteriStrips™) and/or a clear dressing (Opsite™) over the incisions, leave them in place. They will fall off on their own in 1 to 2 weeks. Do not remove them unless your child's doctor says it is okay.
- Some patients have surgical glue (Dermabond®) instead of other dressings. The Dermabond should be kept dry for one day after surgery and will come off on its own after 3 to 7 days.
- Your child should take a "sponge bath," not a tub bath or shower, for 2 to 3 days after going home or until the doctor says it is all right to let the incision get wet.

❑ Laparoscopic appendectomy

- ❑ Your child will have 3 to 4 small incisions in his/her skin. The incision near the belly button may have gauze and tape dressing. The gauze should be removed 2 days after surgery.
- ❑ If there are small strips of white tape (SteriStrips™) and/or a clear dressing (Opsite™) over the incisions, leave them in place. They will fall off on their own in 1 to 2 weeks. Do not remove them unless your child's doctor says it is okay.
- ❑ If your child has glue (Dermabond®) over the incisions, it will fall off on its own. Do not remove it.
- ❑ Your child may take a shower or a sponge bath. Dry incision sites well after the shower or sponge bath. Do not allow tub baths or swimming until 1 week(s) after surgery.

Activity

- Your child may begin normal activities one week after surgery with the exception of weight lifting (lifting more than 10 pounds) and competitive sports. He or she can begin weight lifting and competitive sports 2 weeks after surgery.
- Your child may return to school 1 to 2 days after surgery and when no longer taking narcotics, such as Oxycodone for pain control.

When to call your doctor after going home

Call your child's doctor if any of the following occurs:

- An incision becomes red.
- There is drainage or blood around the incision.
- An incision becomes more tender or swollen.
- An incision begins to separate (pull apart).
- Your child throws up more than once or has diarrhea that does not go away after a day.
- Fever over 101°F
- The stomach becomes distended (full and firm) or your child acts as if it hurts.
- Your child cannot have a bowel movement.
- Pain is not controlled by the medicine the doctor told you to give.

Follow-up appointment

Your surgeon may plan a follow-up visit for your child in some cases, **or** a clinic nurse will call you for follow-up after a few weeks.

If you have any questions, be sure to ask your child's doctor or nurse or call 614-722-3900.