## PROTOCOLE OPERATOIRE / OPERATIVE REPORT

Site: Children's Hospital Date: 2024-06-26 21:30

Anesthésiste / Anesthetist: Dr. Claire Dubois Chirurgien / Surgeon: Dr. Marie-Claire Dubois

Assistant(s): Dr. resident Chloe Nguyen

Diagnostic préopératoire / Pre-operative diagnosis:

## APPENDICITIS WITH FREE FLUID.

Diagnostic postopératoire / Post-operative diagnosis:

PHLEGMONOUS APPENDICITIS.

Opération / Operation:

#### LAPAROSCOPIC APPENDECTOMY WITH OMENTAL WRAPPING.

Tissu envoyé en pathologie / Tissue sent to pathology: Appendix and inflamed tissue

Anesthésie / Anesthesia: General anesthesia with regional block

# Historique et constatations opératoires / History and operative findings:

A 3-year-old male with one week history of abdominal pain with lethargy. Failed conservative management for gastroesophageal reflux. Imaging: ultrasound showing phlegmonous appendicitis.

# Procédure(s) opératoire(s) / Operative procedure(s):

Patient in supine position. General anesthesia with nitrous oxide administered. Time-out was performed and abdomen prepped in sterile fashion. Incision is made in left lower quadrant for open conversion. Three trocars in total are used for laparoscopic access. No iatrogenic injuries occurred during trocar placement. Upon entering the abdominal cavity, extensive adhesions noted. Appendix was sclerotic and surrounded by Purulent fluid was noted throughout the abdominal cavity. and Mild adhesions between bowel loops observed. No evidence of peritoneal carcinomatosis. We proceed with careful dissection of the appendiceal attachments. We dissect the mesentery of the appendix and use the electrocautery to coagulate the artery. Absorbable ligatures are applied prior to amputation. Specimen placed in EndoCatch bag for removal. Thorough irrigation of the abdominal cavity is performed, removing all purulent material. All port sites closed with Steri-Strips.

IV fluids and pain management as per protocol. No evidence of malignancy. The patient tolerated the procedure well with minimal blood loss.

Case ID: CASE-2DECLS-10319