

PREOPERATIVE DIAGNOSES,1. Acute appendicitis.,2. 29-week pregnancy.,POSTOPERATIVE DIAGNOSES,1. Acute appendicitis.,2. 29-week pregnancy.,OPERATION: , Appendectomy.,DESCRIPTION OF THE PROCEDURE: ,After obtaining the informed consent including all risks and benefits of the procedure, the patient was urgently taken to the operating room where a spinal anesthetic was given and the patient's abdomen was prepped and draped in a usual fashion. Preoperative antibiotics were given. A time-out process was followed. Local anesthetics were infiltrated in the area of the proposed incision. A modified McBurney incision was performed. A very abnormal appendix was immediately found. There was a milky fluid around the area and this was cultured both for aerobic and anaerobic cultures. The distal end of the appendix had transformed itself into an abscess. The proximal portion was normal. The appendix was very friable and a no-touch technique was used. It was carefully dissected off the cecum, and then it was ligated and excised after the mesoappendix had been taken care of. Then the stump was buried with a pursestring of 2-0 Vicryl. The operative area was abundantly irrigated with warm saline and then closed in layers. The layer was further irrigated. A subcuticular suture of Monocryl was performed in the skin followed by the application of Dermabond.,Further local anesthetic was infiltrated at the end of the procedure in the operative area and the patient tolerated the procedure well, and with an estimated blood loss that was not consequential, was transferred from recovery to ICU in a satisfactory

condition.