

Microvascular Clinical Pathway

Site Applicability

Vancouver General Hospital

Pathway Patient Goals

Inclusion Criteria

Home Discharge Criteria

Instructions

- 1. Review pathway once per shift for patient care goals and expected outcomes
- 2. Do not document on this pathway, complete documentation in the Electronic Health Record (Cerner) or paper chart as per policy

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Day of Surgery – OR Day (Post-op Day 0)	
Category	Expected Outcomes
Safety	Bedside safety check
Fall Risk/Care Plan	Fall prevention care plan in place
	Risk assessed & new fall prevention care plan completed
	Not at risk: reviewed & no concerns
LOC/Cognition	Alert & Oriented x 3 (person, place, date)
Physical Assessment	Vital signs and temp within patient's normal limits
	Head to toe assessment (within patient's normal limits)
	Lab values within normal limits
	CBC, Lytes, BUN & Creatinine in AM
Other Considerations	Warm room up to 27 – 30 degrees C
	Air temperature blanket placed centrally over patient
Pain Management	Pain controlled
Elimination	Abdomen soft, non-distended
	Flatus passed
	Bowel sounds present
	Bowel management effective
	Note last BM
	Urinary output > 30 cc/hr
	Note if indwelling catheter, removal considered, removal date
Nutrition	• NPO x 24H
	Document ins and outs
Free Flap/Replant Site	Flap check Q1H (document accordingly)
Donor Site(s)	Muscle Donor Site:
	 Incision/dressing checked q shift and PRN
	No signs of complication
	Skin Graft donor dressing:
	Note dressing type (transparent drape, transparent with Aquacel,
	Xeroform)
	Secondary dressing on skin graft donor site intact
Drains	Emptied and recorded Q6H
	Drain dressing changed daily & PRN
A aktuata / B A a la 11 ta	Drain discontinued as per MD order Drain discontinued as per MD order Drain discontinued as per MD order
Activity/Mobility	Patient repositioned Q2H & PRN
	Note if on bedrest, restricted movement to flap site as per order Should flavorite as your and any order.
	Elevate flap site as per order
	Bathroom privileges – keep flap elevated when up
	 Note if no trapeze and/or no mechanical lifting device

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Post-Op Day 1	
Category	Expected Outcomes
Safety	Bedside safety check
Fall Risk/Care Plan	Fall prevention care plan in place
	Risk assessed & new fall prevention care plan completed
	Not at risk: reviewed & no concerns
LOC/Cognition	Alert & Oriented x 3 (person, place, date)
Physical Assessment	Vital signs and temp within patient's normal limits
	Head to toe assessment (within patient's normal limits)
	Lab values within normal limits
	CBC, Lytes, BUN & Creatinine in AM
Other Considerations	Warm room up to 27 – 30 degrees C
	Air temperature blanket placed centrally over patient
Pain Management	Pain controlled
Elimination	Abdomen soft, non-distended
	Flatus passed
	Bowel sounds present
	Bowel management effective
	Note last BM
	Urinary output > 30 cc/hr
	Note if indwelling catheter, removal considered, removal date
Nutrition	NPO X 24 hours post OR and then start Xanthine-free diet (clear)
	fluids to DAT) as per order
	Document ins and outs
Free Flap/Replant Site	Flap check Q1H (Document accordingly)
Donor Site(s)	Muscle Donor Site:
	 Incision/dressing checked q shift and PRN
	No signs of complication
	Skin Graft donor dressing:
	Note dressing type (transparent drape, transparent with Aquacel,
	Xeroform)
	Pooling fluid under dressing aspirated PRN
	Xeroform free from slime, free from excessive dried blood, exudry
	under dependent areas
	Linens/gown free from site
	Secondary dressing removed from skin graft donor site
Drains	Emptied and recorded Q6H
	Drain dressing changed daily & PRN
	Drain discontinued as per MD order
Activity/Mobility	Patient repositioned Q2H & PRN
	Note if on bedrest, restricted movement to flap site as per order
	Elevate flap site as per order
	Bathroom privileges – keep flap elevated when up
	 Note if no trapeze and/or no mechanical lifting device

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Post-Op Day 2	
Category	Expected Outcomes
Safety	Bedside safety check
Fall Risk/Care Plan	Fall prevention care plan in place
	Risk assessed & new fall prevention care plan completed
	Not at risk: reviewed & no concerns
LOC/Cognition	Alert & Oriented x 3 (person, place, date)
Physical Assessment	Vital signs and temp within patient's normal limits
	 Head to toe assessment (within patient's normal limits)
	Lab values within normal limits
Other Considerations	Warm room up to 27 – 30 degrees C
	Air temperature blanket placed centrally over patient
Pain Management	Pain controlled
Elimination	Abdomen soft, non-distended
	Flatus passed
	Bowel sounds present
	Bowel management effective
	Note last BM
	Urinary output > 30 cc/hr
	Note if indwelling catheter, removal considered, removal date
Nutrition	Xanthine-free diet (clear fluids to DAT)
	Document ins and outs
Free Flap/Replant Site	Flap check Q1H until ordered, then flap check Q2H (Document)
	accordingly)
Donor Site(s)	Muscle Donor Site:
	Incision/dressing checked q shift and PRN
	No signs of complication
	Skin Graft donor dressing:
	Note dressing type (transparent drape, transparent with Aquacel,
	Xeroform)
	Pooling fluid under dressing aspirated PRN
	Xeroform free from slime, free from excessive dried blood, exudry
	under dependent areas
	Linens/gown free from site
Drains	Emptied and recorded Q6H
	Drain dressing changed daily & PRN
A .: .: /A A . ! !!!	Drain discontinued as per MD order
Activity/Mobility	Patient repositioned Q2H & PRN
	Note if on bedrest, restricted movement to flap site as per order
	Elevate flap site as per order
	Bathroom privileges – keep flap elevated when up
	Note if no trapeze and/or no mechanical lifting device

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Post-Op Day 3	
Category	Expected Outcomes
Safety	Bedside safety check
Fall Risk/Care Plan	Fall prevention care plan in place
	Risk assessed & new fall prevention care plan completed
	Not at risk: reviewed & no concerns
LOC/Cognition	Alert & Oriented x 3 (person, place, date)
Physical Assessment	Vital signs and temp within patient's normal limits
	 Head to toe assessment (within patient's normal limits)
	Lab values within normal limits
Other Considerations	Warm room up to 27 – 30 degrees C
	Air temperature blanket placed centrally over patient
Pain Management	Pain controlled
Elimination	Abdomen soft, non-distended
	Flatus passed
	Bowel sounds present
	Bowel management effective
	Note last BM
	Urinary output > 30 cc/hr
	Note if indwelling catheter, removal considered, removal date
Nutrition	Xanthine-free diet (clear fluids to DAT)
	Document ins and outs
Free Flap/Replant Site	Flap check Q2H (Document accordingly)
Donor Site(s)	Muscle Donor Site:
	 Incision/dressing checked q shift and PRN
	No signs of complication
	Skin Graft donor dressing:
	 Note dressing type (transparent drape, transparent with Aquacel, Xeroform)
	Pooling fluid under dressing aspirated PRN
	Xeroform free from slime, free from excessive dried blood, exudry
	under dependent areas
	Linens/gown free from site
Drains	Emptied and recorded Q6H
	Drain dressing changed daily & PRN
	Drain discontinued as per MD order
Activity/Mobility	Patient repositioned Q2H & PRN
-	Note if on bedrest, restricted movement to flap site as per order
	Elevate flap site as per order
	Bathroom privileges – keep flap elevated when up
	Note if no trapeze and/or no mechanical lifting device

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Post-Op Day 4 Category	Expected Outcomes
Safety	Bedside safety check
Fall Risk/Care Plan	Fall prevention care plan in place
I all NISK/ Cale Flatt	Risk assessed & new fall prevention care plan completed
	Not at risk: reviewed & no concerns
LOC/Cognition	Alert & Oriented x 3 (person, place, date)
Physical Assessment	Vital signs and temp within patient's normal limits
	Head to toe assessment (within patient's normal limits) A labeled as within a great limits.
Oth an Canaidanatiana	Lab values within normal limits
Other Considerations	Warm room up to 27 – 30 degrees C
	Air temperature blanket placed centrally over patient
Pain Management	Pain controlled
Elimination	Abdomen soft, non-distended
	Flatus passed
	Bowel sounds present
	Bowel management effective
	Note last BM
	Urinary output > 30 cc/hr
	Note if indwelling catheter, removal considered, removal date
Nutrition	Xanthine-free diet (clear fluids to DAT)
	Document ins and outs
Free Flap/Replant Site	Flap check Q2H until ordered, then Q4H (Document accordingly)
Donor Site(s)	Muscle Donor Site:
	Incision/dressing checked q shift and PRN
	No signs of complication
	Skin Graft donor dressing:
	 Note dressing type (transparent drape, transparent with Aquacel, Xeroform)
	Pooling fluid under dressing aspirated PRN
	Xeroform free from slime, free from excessive dried blood, exudry
	under dependent areas
	Linens/gown free from site
Drains	Emptied and recorded Q6H
	Drain dressing changed daily & PRN
	Drain discontinued as per MD order
Activity/Mobility	Patient repositioned Q2H & PRN
,,,	Note if on bedrest, restricted movement to flap site as per order
	Elevate flap site as per order
	Bathroom privileges – keep flap elevated when up
	Note if no trapeze and/or no mechanical lifting device

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Post-Op Day 5	
Category	Expected Outcomes
Safety	Bedside safety check
Fall Risk/Care Plan	Fall prevention care plan in place
	Risk assessed & new fall prevention care plan completed
	Not at risk: reviewed & no concerns
LOC/Cognition	Alert & Oriented x 3 (person, place, date)
Physical Assessment	Vital signs and temp within patient's normal limits
	Head to toe assessment (within patient's normal limits)
	Lab values within normal limits
Other Considerations	Warm room up to 27 – 30 degrees C
	Air temperature blanket placed centrally over patient
Pain Management	Pain controlled
Elimination	Abdomen soft, non-distended
	Flatus passed
	Bowel sounds present
	Bowel management effective
	Note last BM
	Urinary output > 30 cc/hr
	Note if indwelling catheter, removal considered, removal date
Nutrition	Xanthine-free diet (clear fluids to DAT)
	Document ins and outs
Free Flap/Replant Site	Flap check Q4H (Document accordingly)
	Flap dressings removed & flap exposed
	Protective dressings for activity & sleep
Donor Site(s)	Muscle Donor Site:
	 Incision/dressing checked q shift and PRN
	No signs of complication
	Skin Graft donor dressing:
	 Note dressing type (transparent drape, transparent with Aquacel,
	Xeroform)
	 Pooling fluid under dressing aspirated PRN
	Xeroform free from slime, free from excessive dried blood, exudry
	under dependent areas
	Linens/gown free from site
Drains	Emptied and recorded Q6H
	Drain dressing changed daily & PRN
	Drain discontinued as per MD order
Activity/Mobility	Patient repositioned Q2H & PRN
	Note if on bedrest, restricted movement to flap site as per order
	Elevate flap site as per order
	Bathroom privileges – keep flap elevated when up
	Note if no trapeze and/or no mechanical lifting device
	Dangle protocol initiated
	 Patient taught about protective dressing & tensor for activity

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Post-Op Day 6	
Category	Expected Outcomes
Safety	Bedside safety check
Fall Risk/Care Plan	Fall prevention care plan in place
	Risk assessed & new fall prevention care plan completed
	Not at risk: reviewed & no concerns
LOC/Cognition	Alert & Oriented x 3 (person, place, date)
Physical Assessment	Vital signs and temp within patient's normal limits
•	Head to toe assessment (within patient's normal limits)
	Lab values within normal limits
Other Considerations	Warm room up to 27 – 30 degrees C
	Air temperature blanket placed centrally over patient
Pain Management	Pain controlled
Elimination	Abdomen soft, non-distended
	Flatus passed
	Bowel sounds present
	Bowel management effective
	Note last BM
	Urinary output > 30 cc/hr
	Note if indwelling catheter, removal considered, removal date
Nutrition	Xanthine-free diet (clear fluids to DAT)
	Document ins and outs
Free Flap/Replant Site	Flap check Q4H (Document accordingly)
	Flap dressings removed & flap exposed
	Protective dressings for activity & sleep
Donor Site(s)	Muscle Donor Site:
	 Incision/dressing checked q shift and PRN
	No signs of complication
	Skin Graft donor dressing:
	Note dressing type (transparent drape, transparent with Aquacel,
	Xeroform)
	Pooling fluid under dressing aspirated PRN
	Xeroform free from slime, free from excessive dried blood, exudry
	under dependent areas
	Linens/gown free from site
Drains	Emptied and recorded Q6H
	Drain dressing changed daily & PRN
	Drain discontinued as per MD order
Activity/Mobility	Patient repositioned Q2H & PRN
	Note if on bedrest, restricted movement to flap site as per order Standard flap site as a secondard.
	Elevate flap site as per order
	Bathroom privileges – keep flap elevated when up Note if you have a see all flat and a reach price. If the advance of the second see all flat and a second second see all flat and a second seco
	Note if no trapeze and/or no mechanical lifting device
	Dangle protocol initiated
	 Patient taught about protective dressing & tensor for activity

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Post-Op Day 7	
Category	Expected Outcomes
Safety	Bedside safety check
Fall Risk/Care Plan	Fall prevention care plan in place
	Risk assessed & new fall prevention care plan completed
	Not at risk: reviewed & no concerns
LOC/Cognition	Alert & Oriented x 3 (person, place, date)
Physical Assessment	Vital signs and temp within patient's normal limits
	Head to toe assessment (within patient's normal limits)
	Lab values within normal limits
Other Considerations	Warm room up to 27 – 30 degrees C
	Air temperature blanket placed centrally over patient
Pain Management	Pain controlled
Elimination	Abdomen soft, non-distended
	Flatus passed
	Bowel sounds present
	Bowel management effective
	Note last BM
	Urinary output > 30 cc/hr
	Note if indwelling catheter, removal considered, removal date
Nutrition	Xanthine-free diet (clear fluids to DAT)
	Document ins and outs
Free Flap/Replant Site	Flap check Q6H until discharged (Document accordingly)
	Flap surgical dressings removed & flap exposed
	Protective dressings for activity & sleep
Donor Site(s)	Muscle Donor Site:
	 Incision/dressing checked q shift and PRN
	No signs of complication
	Skin Graft donor dressing:
	Note dressing type (transparent drape, transparent with Aquacel,
	Xeroform)
	Donor site exposed to air
	Xeroform – lifting areas trimmed
	Healed areas moisturized BID
Drains	Emptied and recorded Q6H
	Drain dressing changed daily & PRN
	Drain discontinued as per MD order
Activity/Mobility	Patient repositioned Q2H & PRN
	Note if on bedrest, restricted movement to flap site as per order
	Elevate flap site as per order
	Bathroom privileges – keep flap elevated when up
	Note if no trapeze and/or no mechanical lifting device
	Dangle protocol initiated
	Patient taught about protective dressing & tensor for activity

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Category	Expected Outcomes
Safety	Bedside safety check
Fall Risk/Care Plan	Fall prevention care plan in place
i an many cure rian	Risk assessed & new fall prevention care plan completed
	Not at risk: reviewed & no concerns
LOC/Cognition	Alert & Oriented x 3 (person, place, date)
Physical Assessment	Vital signs and temp within patient's normal limits
Physical Assessment	Head to toe assessment (within patient's normal limits)
	Lab values within normal limits
Other Considerations	Warm room up to 27 – 30 degrees C
other considerations	Air temperature blanket placed centrally over patient
Pain Management	Pain controlled
Pain Management Elimination	
Emmination	Abdomen soft, non-distended Elatus passed
	Flatus passed Reveal accord to passent
	Bowel sounds present Bowel management offseting
	Bowel management effective And lock BM
	Note last BM Heigen authority 20 or //ww
	Urinary output > 30 cc/hr
	Note if indwelling catheter, removal considered, removal date
Nutrition	Xanthine-free diet (clear fluids to DAT)
	Document ins and outs
Free Flap/Replant Site	Flap check Q6H until discharged
	Flap surgical dressings removed & flap exposed
	Protective dressings for activity & sleep
Donor Site(s)	Muscle Donor Site:
	Incision/dressing checked q shift and PRN
	No signs of complication
	Skin Graft donor dressing:
	Note dressing type (transparent drape, transparent with Aquacel,
	Xeroform)
	Donor site exposed to air
	Xeroform – lifting areas trimmed
	Healed areas moisturized BID
Drains	Emptied and recorded Q6H
	Drain dressing changed daily & PRN
	Drain discontinued as per MD order
Activity/Mobility	Patient repositioned Q2H & PRN
	Note if on bedrest, restricted movement to flap site as per order
	Elevate flap site as per order
	Bathroom privileges – keep flap elevated when up
	Note if no trapeze and/or no mechanical lifting device
	Dangle protocol initiated
	 Patient taught about protective dressing & tensor for activity

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Developed By

Effective Date:	
Posted Date:	
Last Revised:	
Last Reviewed:	
Approved By:	
	Endorsed By:
	Final Sign Off:
Owners:	VCH
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	Clinical Nurse Educator, Transplant, Urology, Gynecology, Plastics, VGH

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