

Primary Lung Cancer Surgical Clinical Pathway Form

Applicable to: First diagnosis of primary lung cancer (ICD-10: C34/D02.2)

Procedure: Lobectomy/pulmonary resection/pneumonectomy + systematic lymph node dissection, thoracotomy (ICD-9-CM-3: 32.29/32.3-32.5)

Patient Name: _____ Gender: _____ Age: _____ Outpatient Number: _____

Inpatient Number: _____ Admission Date: _____ Discharge Date: _____

Standard Hospitalization Duration: 12-21 days

Time-line	Days 1 of hospitalization (Admission Day)	Days 2 to 6 of hospitalization (Preoperative Day)	Days 4 to 7 of hospitalization (Surgery Day)
Key Diagnostic and Therapeutic Tasks	<input type="checkbox"/> Inquiry of medical history and physical examination <input type="checkbox"/> Complete medical record writing <input type="checkbox"/> Issuance of laboratory test and examination request forms <input type="checkbox"/> Ward round by attending physician <input type="checkbox"/> Preliminary diagnosis	<input type="checkbox"/> Ward round by senior physician <input type="checkbox"/> Preoperative preparation <input type="checkbox"/> Clinical staging and preoperative evaluation <input type="checkbox"/> Preoperative discussion, determination of surgical plan <input type="checkbox"/> Consultation with relevant departments as needed based on the condition <input type="checkbox"/> Resident physician completes progress notes, preoperative summary, and senior physician's ward round records, etc. <input type="checkbox"/> Sign surgery informed consent, self-pay items agreement, blood transfusion consent, and power of attorney consent forms	<input type="checkbox"/> Preoperative urinary catheter insertion <input type="checkbox"/> Surgery <input type="checkbox"/> Surgeon completes surgical records <input type="checkbox"/> Resident physician completes postoperative progress notes <input type="checkbox"/> Ward round by senior physician <input type="checkbox"/> Observe vital signs <input type="checkbox"/> Explain the condition and postoperative precautions to the patient and family
Medical Orders	Long-term orders: <input type="checkbox"/> Thoracic surgery secondary care <input type="checkbox"/> Regular diet Temporary orders: <input type="checkbox"/> Complete urgent blood count, urinalysis, stool analysis <input type="checkbox"/> Coagulation function, blood type, liver function, renal function, electrolytes, infectious disease screening <input type="checkbox"/> Pulmonary function tests, arterial blood gas analysis <input type="checkbox"/> Electrocardiogram (ECG) <input type="checkbox"/> Sputum cytology, flexible bronchoscopy <input type="checkbox"/> Imaging tests: Chest X-ray, chest CT, abdominal ultrasound or CT, whole-body bone scan, brain MRI or CT	Long-term orders: <input type="checkbox"/> Nebulized inhalation Temporary orders: <input type="checkbox"/> General anesthesia planned for tomorrow <input checked="" type="radio"/> Pulmonary wedge resection <input checked="" type="radio"/> Lobectomy <input checked="" type="radio"/> Pneumonectomy <input checked="" type="radio"/> Thoracotomy exploration <input type="checkbox"/> NPO (nothing by mouth) for 6 hours before surgery <input type="checkbox"/> Preoperative enema in the evening <input type="checkbox"/> Preoperative skin preparation <input type="checkbox"/> Blood preparation <input type="checkbox"/> Preoperative sedatives (if necessary) <input type="checkbox"/> Intraoperative antibiotics <input type="checkbox"/> Other special medical orders <input type="checkbox"/> If necessary: Mediastinoscopy, 24-hour Holter electrocardiogram, echocardiography, percutaneous lung biopsy, etc.	Long-term orders: <input type="checkbox"/> Thoracic surgery postoperative nursing routine <input type="checkbox"/> Special or level one nursing care <input type="checkbox"/> Liquid diet 6 hours after awakening <input type="checkbox"/> Oxygen therapy <input type="checkbox"/> Monitoring of temperature, ECG, blood pressure, respiration, pulse, oxygen saturation <input type="checkbox"/> Chest tube drainage measurement <input type="checkbox"/> Continuous urinary catheterization, record 24-hour intake and output <input type="checkbox"/> Nebulized inhalation <input type="checkbox"/> Prophylactic antibiotic therapy <input type="checkbox"/> Analgesics (if necessary) Temporary orders: <input type="checkbox"/> Other special medical orders
Key Nursing Tasks	<input type="checkbox"/> Introduce the hospital ward environment, facilities, and equipment <input type="checkbox"/> Admission nursing assessment <input type="checkbox"/> Assist with smoking cessation	<input type="checkbox"/> Preoperative education, skin preparation, etc. <input type="checkbox"/> Remind the patient to fast (NPO) before surgery <input type="checkbox"/> Breathing exercises	<input type="checkbox"/> Monitor changes in the patient's condition <input type="checkbox"/> Postoperative psychological and lifestyle care <input type="checkbox"/> Maintain airway patency

Record of Variations	<input type="checkbox"/> No <input type="checkbox"/> Yes, Reasons: 1. 2.	<input type="checkbox"/> No <input type="checkbox"/> Yes, Reasons: 1. 2.	<input type="checkbox"/> No <input type="checkbox"/> Yes, Reasons: 1. 2.
Nurse Signature			
Physician Signature:			

Time-line	Days 5 to 8 of hospitalization (Postoperative Day 1)	Days 6 to 12 of hospitalization (Days 2 to 7 of Postoperative)	Days 13 to 21 of hospitalization (Days 8 to 14 of Postoperative) (Discharge Day)
Key Diagnostic and Therapeutic Tasks	<input type="checkbox"/> Ward round by senior physician <input type="checkbox"/> Resident physician completes medical record writing <input type="checkbox"/> Observe chest tube drainage <input type="checkbox"/> Monitor vital signs and lung auscultation <input type="checkbox"/> Encourage and assist the patient in expectoration <input type="checkbox"/> If necessary, perform sputum aspiration with bronchoscopy	<input type="checkbox"/> Ward round by senior physician <input type="checkbox"/> Resident physician completes medical record writing <input type="checkbox"/> Recheck CBC, blood biochemistry, and chest X-ray as needed based on the condition <input type="checkbox"/> Remove chest tube and perform wound dressing change depending on chest drainage and lung re-expansion status <input type="checkbox"/> If necessary, perform sputum aspiration with bronchoscopy <input type="checkbox"/> Adjust or discontinue antibiotics as needed	<input type="checkbox"/> Suture removal from incision <input type="checkbox"/> Senior physician's ward round to confirm discharge <input type="checkbox"/> Resident physician completes discharge summary and medical record cover page <input type="checkbox"/> Explain discharge instructions to the patient and family <input type="checkbox"/> Determine postoperative treatment plan based on pathology
Medical Orders	Long-term orders: <input type="checkbox"/> Thoracic surgery level one nursing <input type="checkbox"/> Regular diet Temporary orders: <input type="checkbox"/> Complete urgent blood count, liver and renal function, electrolytes <input type="checkbox"/> Chest X-ray <input type="checkbox"/> Other special medical orders	Long-term orders: <input type="checkbox"/> Thoracic surgery level two nursing <input type="checkbox"/> Discontinue closed chest drainage measurement <input type="checkbox"/> Discontinue urine output monitoring, discontinue oxygen therapy, discontinue ECG monitoring <input type="checkbox"/> Discontinue nebulized inhalation <input type="checkbox"/> Discontinue antibiotics Temporary orders: <input type="checkbox"/> Remove closed chest drainage tube <input type="checkbox"/> Remove urinary catheter <input type="checkbox"/> Change wound dressing <input type="checkbox"/> Recheck chest X-ray or chest CT, CBC, liver and renal function, electrolytes (as needed) <input type="checkbox"/> Other special medical orders	Temporary orders: <input type="checkbox"/> Suture removal from incision <input type="checkbox"/> Change wound dressing <input type="checkbox"/> Notify discharge <input type="checkbox"/> Provide discharge medications <input type="checkbox"/> Schedule regular follow-up appointments
Key Nursing Tasks	<input type="checkbox"/> Monitor the patient's condition <input type="checkbox"/> Psychological and lifestyle care <input type="checkbox"/> Assist the patient in coughing up sputum	<input type="checkbox"/> Monitor the patient's condition <input type="checkbox"/> Psychological and lifestyle care <input type="checkbox"/> Assist the patient in coughing up sputum	<input type="checkbox"/> Monitor the patient's condition <input type="checkbox"/> Psychological and lifestyle care <input type="checkbox"/> Postoperative rehabilitation guidance
Record of Variations	<input type="checkbox"/> No <input type="checkbox"/> Yes, Reasons: 1. 2.	<input type="checkbox"/> No <input type="checkbox"/> Yes, Reasons: 1. 2.	<input type="checkbox"/> No <input type="checkbox"/> Yes, Reasons: 1. 2.
Nurse Signature			
Physician Signature:			