

NURSING CARE PLAN 44 PRE AND POST OPERATIVE NURSING CARE OF A CHILD/INFANT UNDERGOING LIVER BIOPSY

Full Name:

Address: Addressograph

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Care Plan 44		Goals	Issue Date: Jan 2024 Review Date: Jan 2027		
Problem		R			
is undergoing a liver biopsy for 		 Pre-operative care; the child/infant and family will be safely prepared for liver biopsy in theatre, physically and psychologically. Post-operative care; the child/infant will have a safe and comfortable recovery post operatively. Complications will be detected early and managed appropriately. 			
No		NURSING INTERVENTION	Commencement, Date, Signature, Time, Grade	Discontinued, Date, time, Signature, Grade	
1		Pre-operative Care			
 Explain procedure to patient and family. Involve play specialist in the process. Discuss with child his/her preferred method of induction if appropriate. Discuss any other requests that the parent or child may have in relation to surgery. Ensure child has a bath/shower prior to surgery. Fast from milk and solids from: Clear fluids from: Clear fluids from: Ensure patient is highlighted as fasting to ward staff and explain to parents and child the meaning of same. Remove food from child's reach. Specific pre-operative needs: Pre-operative bloods, Intravenous (IV)Fluids, I.V Vitamin K, Platelet transfusion etc; Clarify same with GI medical team. Ensure medications are reviewed by the Gastroenterology (GI) medical team including anti-coagulant medication e.g. aspirin and warfarin, Non-Steroidal Anti Inflammatory Drugs (NSAIDS). Complete pre-operative checklist, date and sign, ensure consent is signed. Addminister pre-medication and or other medications if prescribed: Accompany child/infant and parent safely to theatre Child/infant may bring comforter to theatre with him/her 					
2 Post-Operative Care					
 Check that Airway, Breathing, Circulation and Condition are stable prior to safe transfer from theatre to the ward. Assess and respond promptly to altered respiratory effort, shock and haemorrhage. Monitor colour, pulse, respirations, blood pressure, oxygen saturations, and temperature. Observation frequency as below: 					
S mins x 1 hour 15mins x 2 hours 30mins x 4 hours 1 hourly x 2 hours 4 hourly thereafter for 16 hours or until discharge or as directed by the GI Team/ surgeon / anaesthetist. • Document vital signs in PEWS chart, report and escalate as per recommendations on PEWS chart. • GI consultant on call to be contacted with any concerns.					



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HCR..... • Encourage the patient to lie on their right side or supine position. • Encourage bedrest for 2-3 hours post procedure. Wound Care 3 • Monitor wound site with observations for redness, pain, ooze, haemorrhage. Report any abnormalities promptly to the nurse in charge & GI/Medical team Dressing: Pressure dressing can be removed 24hours post liver biopsy **Nausea and Vomiting** 4 Observe for nausea / vomiting. Assess possible cause. • Support child/infant and provide emesis bowl. Administer anti-emetics and evaluate same. Record colour, consistency and volume of vomitus in intake/output chart. Encourge fluids 1-2 hours post procedure • Light diet after 4 hours, regular diet after 6 hours **Or** diet as per consultant postoperative instructions 5 Pain • Assess pain score on return from theatre. • Utilize non-pharmacological means of pain relief. • Administer analgesia as required and monitor effects of same, report and record. Avoid Non Steroidal Anti Inflammatory drugs. • Report any concerns promptly to the GI Medical team **Medications** 6 • Administer other medications as and if prescribed • Ensure medications are reviewed by GI Team prior to discharge as certain medications may be recommenced e.g anti coagulants. 7 Discharge Tolerating food and drink • No signs of bleeding Reviewed by GI team and happy for discharge Prescription/pharmacy education Verbal education and provide liver biopsy parent information leaflet OPD booked

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