

Complicated Appendicitis: Post Operative Management Clinical Practice Guideline



REVISED 12/29/21
ORIGINAL 12/15/16

Appendectomy with a Complicated Appendix (Category 2b & 2c)

2B: Focal perforation – hole clearly in the appendix, focal collection of pus in the right gutter or pelvis, small perf created during extraction, etc.

2C: Gross contamination - purulence throughout abdomen/pelvis, fecal contamination, grossly perforated. Pus outside of RLQ. Diffuse peritonitis. Floating fecalith.

Initial Post-operative Management

Antibiotic Therapy

See table on pg. 2 for dosing schedule

- Ceftriaxone
- Metronidazole

IF PCN ALLERGY USE

Ciprofloxacin & Metronidazole

Antibiotic Step up Therapy

- 72hrs post op if febrile, vomiting, poor po intake

D/C Ceftriaxone & Metronidazole

- Start Zosyn unless pt. has a PCN Allergy (See table on pg. 2 for dosing schedule)

Nutrition/GI

(NG not recommended)

- Clears and advance as tolerated
- When tolerating regular diet start Miralax PO (max 17 gm) prn no stool for 24 hours (see dosing pg.2)
- Advance to oral pain medications* once tolerating reg. diet

Pain Control*

- Acetaminophen: 10mg/kg/dose po q4hr (max 500mg) for pain
- Toradol: 0.5mg/kg/dose IV q 6hrs (max 30 mg/dose) Max 20 doses
- Morphine: 0.1mg/kg/dose IV q 3hr PRN pain if acetaminophen or toradol is not effective (max 5mg/dose)
- Gabapentin 10 mg/kg/dose po TID (max 300mg)

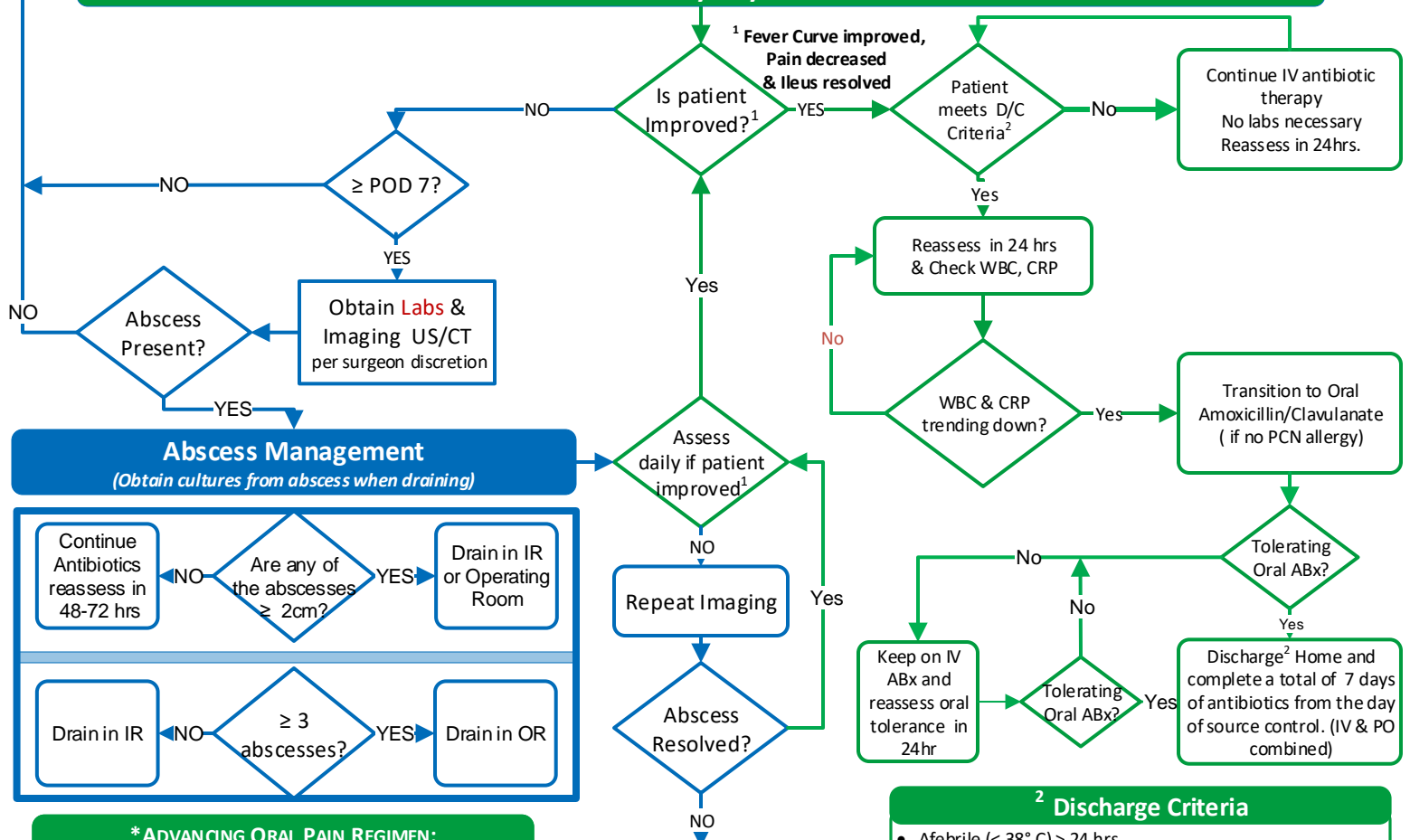
Activity/Consults

(Routine Labs not recommended)

- OOB on surgical day X1 minimally & ambulate 3x qd
- Consult Child Life
- Consult PT as needed
- Consult Nutrition as needed
- Avoid placing a foley; if used in surgery remove on POD 1

Evaluate Fever Curve (including daily T-max), Pain response, and GI response to diet

Every Day



* ADVANCING ORAL PAIN REGIMEN:

Once pain controlled and tolerating PO, **change these medications from IV to PO:**

- Toradol to **Ibuprofen** 10mg/kg/dose po q 6hr prn (max 400mg/dose)
- Morphine to : **Hydrocodone with Acetaminophen 325 mg** 0.2mg hydrocodone/kg/dose po q6hr PRN pain (max 5mg hydrocodone/dose)
- If discharged on **opioids** also order Miralax qd X 5 days
- Consider Gabapentin as a discharge medication

- Return to OR/IR for drainage
- Consider ID Consult
- Assess susceptibility of organism to antibiotic
- Patient is off Guideline

² Discharge Criteria

- Afebrile (< 38° C) > 24 hrs
- Tolerating regular diet
 - 50% of 3 consecutive meals
- Adequate pain control with oral medications
 - Pain score is 3 or less within 1 hr. after oral medication administered
- Benign Abdominal Exam by attending surgeon/designee
- Ambulation without assistance (250 feet)
- If discharging home with a drain, include drainage care instructions

Complicated Appendicitis: Post Operative 2b & 2c Clinical Practice Guideline

REVISED 12/29/21
ORIGINAL 12/15/16



Empiric IV Therapy for Appendicitis

Indication	Antibiotics	Dose & Schedule	Max Single Dose
Complicated Appendicitis (CA)	Ceftriaxone And Metronidazole	75mg/kg q 24h IV	2000mg
		30 mg/kg q 24h IV	1500mg
Complicated Appendicitis with severe penicillin allergy ¹	Ciprofloxacin And Metronidazole	15 mg/kg q 12hr IV	400mg
		30 mg/kg q 24h IV	1500mg
Complicated Appendicitis Step UP Therapy			
Complicated Appendicitis with sepsis	Piperacillin/tazobactam ²	100mg/kg q8h IV	4000mg

¹Type 1 allergy defined by urticaria or anaphylaxis

²Metronidazole does not need to be added to a regimen with piperacillin/tazobactam since anaerobic coverage is adequate with piperacillin/tazobactam

PO Stepdown Therapy

Indication	Antibiotic	Dose & Schedule	Max Single Dose
Complicated Appendicitis (CA)	Amoxicillin/Clavulanate Liquid 400mg/5mg for <40kg	45/mg/kg/day divided BID	875 mg
	Amoxicillin/Clavulanate Tablet (875mg) for >40kg	1 tablet BID	875mg
Complicated Appendicitis (CA) with Severe PCN Allergy	Ciprofloxacin	15mg/kg q 12h po	500mg
	And Metronidazole	10mg/kg q 8h po	500mg

MIRALAX DOSING

When tolerating regular diet start **Miralax** po (max 17 gm) prn no stool for 24 hours AND If discharged on narcotics also order Miralax qd X 5 days

- Age 1-5 years 4.25 grams (1/4 capful)
- Age 6-11 years 8.5 grams (1/2 capful)
- Age 12 and up 17 grams (1 whole capful)