

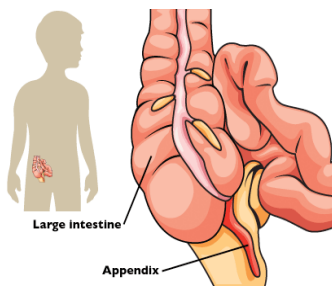


Pediatric Surgical
Associates, Ltd.

Appendectomy for Perforated Appendicitis

What is perforated appendicitis?

The appendix is located in the right lower abdomen and is a “worm-like” tubular structure attached to the first part of the large intestine. Acute appendicitis is an infection of the appendix that makes it inflamed. As a result of the infection the appendix sometimes develops a hole in it that allows the infection to spread to the rest of the abdomen. This is “perforated” or “ruptured” appendicitis.



How is it treated?

The treatment for appendicitis begins with hydration and antibiotics. The appendix is then surgically removed in order to prevent the infection from returning. If a hole is found in the appendix during surgery, your child will require further antibiotics in order to prevent another infection from occurring.

What will happen in the hospital?

After surgery, patients with perforated appendicitis will remain in the hospital for several days and will continue on IV antibiotics. All children with perforated appendicitis will receive *at least* 3 days of antibiotics in the hospital after the surgery.

Sometimes the intestines go to sleep as a result of the infection in the abdomen. This is called an ileus. Occasionally a tube placed through the nose into the stomach is necessary in order to prevent vomiting and keep your child comfortable. If the intestines remain asleep and your child cannot take liquids for seven days or more post-operatively, a Peripherally Inserted Central Venous Catheter (PICC) is placed for intravenous nutrition (TPN).

Some children will experience diarrhea after the surgery. Some children will experience pain with urination after the surgery. Both of these are normal and will improve as the infection resolves.

If your child is still in the hospital 7 days after the surgery we will obtain either an ultrasound or a CT scan in order to evaluate for a secondary infection. These studies cannot be done earlier because the infection will not be well-defined at that point and the studies would need to be repeated later. If the imaging shows a secondary infection it will be treated with more IV antibiotics, a drain placed by our radiology colleagues, or both.



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When will my child be discharged?

Children with perforated appendicitis who have had surgery are admitted post-operatively and are kept in the hospital until they are taking a regular diet and are not having fevers, nausea, vomiting, can walk, and pain is well controlled. Your child will be considered ready for discharge when he/she meets the following criteria:

- No fever for 24 hours
- Pain controlled on medications taken by mouth
- Eating and drinking enough to stay hydrated

What will be my child's recovery at home?

- Children with perforated appendicitis usually go back to school within 7-10 days after hospital discharge.
- Gym and sports may be resumed in 2 weeks.
- No tub bathing or swimming for 7 days after the surgery. It is ok to shower and let water run over the dressing/incision.

We will see your child in our clinic for follow-up 2-4 weeks after discharge from the hospital. Please call 612-813-8000 to schedule an appointment with your child's surgeon.

What should I be looking out for after the operation?

Watch for the following:

- Fevers (Temperature over 101° F)
- Abdominal pain
- Nausea/vomiting or Diarrhea
- Wound infections (redness, swelling, drainage, tenderness)

If your child develops these or any symptoms that concern you please call our office at 612-813-8000.

What medications will we take home?

- Acetaminophen _____ mg every 6 hours as needed for pain/fever
- Ibuprofen _____mg every 6 hours as needed for pain/fever
- Tramadol_____mg every 6 hours as needed for pain
- Lactobacillus _____ cap twice daily for 2 weeks (Lactobacillus is a probiotic that will help your child's intestines recover.)

Who should I call with questions?

Call Pediatric Surgical Associates at 612-813-8000. Our phones are answered 24 hours per day. If it is after hours our answering service will put you in contact with the on-call surgeon.