



SPLENECTOMY

What is a splenectomy?

A splenectomy is the removal of the spleen from the upper left abdomen. The spleen filters and removes old blood cells and bacteria, as well as making some of the body's red blood cells. In some cases the surgeon may be able to remove a part of the spleen (partial splenectomy) or to repair the spleen (splenorrhaphy).

How are spleen problems diagnosed and treated?

Problems with the spleen are diagnosed by physical examination of the abdomen, blood tests, X-rays, ultrasound and CT scan. Abdominal or belly pain can be common, with some children complaining their left shoulder hurts. Children with medical disorders affecting the spleen can have low blood counts. A child with a spleen infection will usually be treated first with antibiotics and a drainage procedure.

How is the decision made that surgery is needed?

This decision is based on how severely the spleen is affected by the disorder.. The surgeon will consider the spleen's value in immune function when deciding whether to remove the whole spleen or a part of the spleen. The child's age and medical disorder will also be part of the decision.

What can I expect from surgery?

The surgery can be done laparoscopic or open. In laparoscopy a small camera scope is placed through the belly button to guide the surgical tools needed for removal of the spleen through small holes in the abdomen. If the spleen has enlarged or the procedure is an emergency, the open approach may be required. In an open approach, the surgeon will make a cut (incision) through the abdomen. After surgery the child will receive fluids, pain medication and antibiotics through an IV (small tube in the vein). The child will be closely watched for any signs of bleeding or infection. Your child will need three important vaccinations: pneumovax for pneumococcal infections, the vaccine for meningococcal infections, and the vaccine for Haemophilus influenza type B infections. Your child may also need to take antibiotics every day to help the body fight infections.

When will my child be able to go home?

Your child will be able to go home when your child can drink and eat, take pain medication by mouth, have no fever or other signs of infection or bleeding, and can get up out of bed and take deep breaths. The parent will learn what signs of infection and illness to report and the information about vaccinations and antibiotics if needed for your child.

What care is needed at home after surgery?

Activity: Your child may eat and drink as usual. Your child may return to school in 3-4 days after discharge. If you need a school excuse please let us know. No P.E., sports, bicycle riding or lifting more than 20 pounds until your child is seen for the postoperative check-up.

Medications: Give pain medications such as acetaminophen (Tylenol) for pain or soreness after surgery. Your doctor will give you a prescription for stronger pain medication if the pain is not relieved by acetaminophen. Follow the directions on the bottle. If your child is on a prescription pain medication, watch for signs of constipation.

Care of the incision: The incision is covered by a bandage(steri-strips) or surgical glue. The stitches are under the skin and will not have to be removed. They will dissolve (melt) in 6-8weeks. If the steri-strips have not fallen off in 5-7 days, you may remove them.

Bathing: 2-3 days after surgery, your child may shower or have a shallow bath. Pat the incision dry if it gets wet. 7 days after surgery, your child may bath as usual.

When should I call the surgery team?

Your child will need to be watched for any signs of bleeding. A bleeding spleen causes sudden abdominal pain, shortness of breath, dizziness or a fast pulse. Call for increased redness or fluid coming from the incision or a fever greater than 101F.

Is there anything else I need to know to care for my child?

If the spleen was removed you should protect your child from others who have an infection. Call your doctor right away if any signs or symptoms of infection develop. These include: fever, shaking chills, cough, aching muscles, headache, vomiting, diarrhea, or abdominal pain. Teachers and other caregivers should also be aware of the signs and symptoms of infection and should be asked to report them immediately. An infection can easily become very serious in a child without a spleen. Communicate this to

all who care for your child. Be sure that your doctor and dentist know that your child's spleen was removed before any procedures.

You may wish to purchase a medical alert I.D. device (e.g. bracelet) indicating your child's spleen has been removed.

If you have any questions or problems, please call

Monday-Friday 8am – 4:30pm 501-364-4852 Surgery Specialty Nurses

After hours and weekends 501-364-1100 Ask for Surgeon On Call

10/14/08 Pediatric Surgery Specialty Nurses

Adapted from www.apsna.org