

Enhanced Recovery After Surgery

For Minimally Invasive Benign Gynecology

Preoperative Considerations

- Patient education and counseling regarding expectations
- Health optimization
- NPO: 2 hours for clear liquids, 6-8 hours for solids
- Preoperative Carbohydrates: Gatorade, Ensure Clear, ClearFast, preOp, Breeze
- Avoid mechanical bowel prep
- Preoperative nausea prophylaxis: Scopolamine, Dexamethasone

Intraoperative Considerations

- Preemptive analgesia
- Multimodal analgesia: Celecoxib 200-400mg PO, Acetaminophen 975-1000mg PO/IV, Gabapentin 600-1200mg PO, Dexamethasone 8-20mg IV, Lidocaine IV
- Regional analgesia (?): TAP Blocks, Exparel – *lack of evidence for laparoscopic surgery*
- Propofol
- Adequate hydration, but avoid fluid overload
- Minimize opioids
- Minimize nitrous oxide and volatile anesthetics
- Avoid hypothermia

Postoperative Considerations

- Laxative
- Chewing gum
- Limit opioid administration
- Early post-op feeding within hours of surgery
- Early mobilization
- Early foley catheter removal