

## NENC Abdominal Pain and EmLap Pathway

Date of Presentation \_\_\_\_/\_\_\_\_/\_\_\_\_  
Time of Presentation \_\_\_\_:\_\_\_\_ hrs  
Location:

NHS Number.....  
Trust Number.....  
Forename, Surname .....  
Date of Birth.....  
Postcode.....

### Patient with Abdominal Pain

**EXCLUDE:**  
Diarrhoeal illness  
Biliary colic  
Ureteric colic  
Urinary sepsis  
Pregnant patient  
Minor GI bleeding

NEWS2 score of 3 or more?

Yes

No

excluded

- ☐ Urgent surgical referral MRCS or above TIME \_\_: \_\_
- ☐ Manage sepsis – **\*\*antibiotics\*\***
- ☐ Take bloods incl. amylase; ABG & lactate. **Request CXR**
- ☐ NEWS 5+ Escalate to senior ED Dr & senior surgeon

**Within 1  
hour**

Process  
patient  
normally

Surgical review MRCS grade

Is there *likely* significant intraabdominal pathology?

No

Yes

- ☐ **Urgent EmLap CT scan** Time requested \_\_: \_\_
- ☐ Scan within 1 hour Time completed \_\_: \_\_
- ☐ Scan reported within 1 hour Reported \_\_: \_\_
- ☐ Reconsider need for antibiotics

No

Is there pathology requiring surgery?

Yes

**START LAPAROTOMY PATHWAY OVER PAGE**

TIME \_\_: \_\_ hrs

## Emergency Laparotomy Pathway ("EmLap")

Patient with intraabdominal pathology requiring surgery

Is this a NELA patient?

- ☐ Enter on NELA database if eligible  
☐ Mortality Risk: NELA .....% P-Possum.....% Judged High Risk? Yes ☐ No ☐  
☐ **Ensure antibiotics given** at booking if intraabdominal sepsis  
☐ Critical Care discussion? Yes ☐ No ☐ Discussed with anaesthetist? Yes ☐ No ☐  
☐ Frailty assessment performed? Yes ☐ No ☐ Judged frail? Yes ☐ No ☐

Book patient for theatre  
Time: \_\_ : \_\_

Tick one:

- ☐ **1. Immediate:** Theatre within 2 hrs  
☐ **2A. Urgent:** Theatre 2-6 hours  
☐ **2B. Urgent:** Theatre 6-18 hours  
☐ **3. Expedited:** Theatre 18+ hours

Arrival time in theatre suite \_\_ : \_\_ hrs  
Document any delays:

### Intraoperative Checklist (must be completed)

- ☐ Consultant Surgeon  
☐ Consultant Anaesthetist  
☐ Antibiotics  
☐ Lactate +/- invasive monitoring  
☐ Goal-Directed Fluid Therapy considered  
☐ NELA domains 1-6 completed

### Postoperative (must be completed)

- ☐ Post-op Placement: Ward ☐ Crit Care ☐ Enhanced care area ☐ Other. ☐  
☐ COTE review necessary Yes ☐ No ☐ Referred? Yes ☐ No ☐