

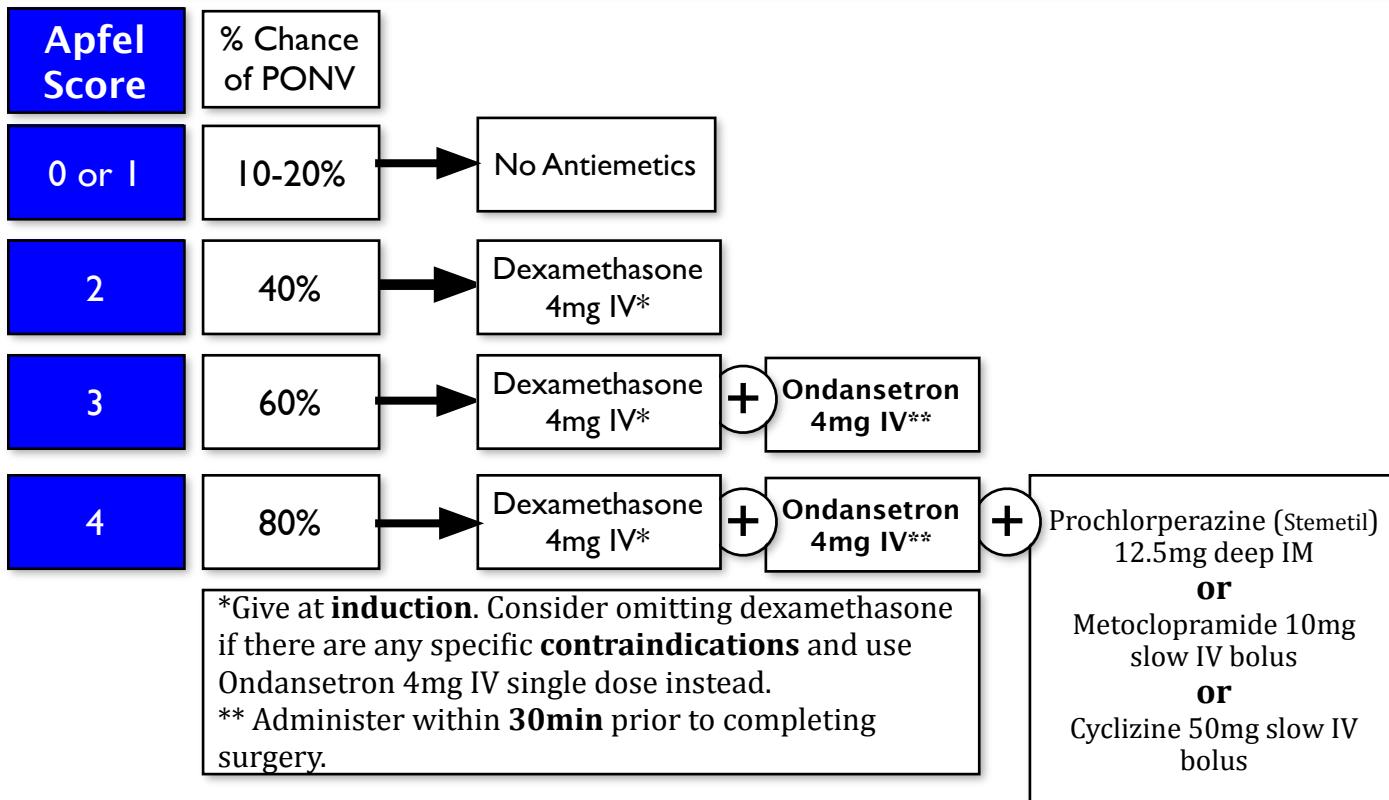
Day Surgery Adult PONV Guideline

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I Take Apfel score

<u>Risk Factors</u>		<u>Points</u>
1)	Female Gender	1
2)	Non-Smoker	1
3)	History of Car/sea sickness, or PONV	1
4)	Postoperative Opioids	1
Total =		0 ... 4

2 Give prophylaxis according to Apfel score:



In all cases, also consider:

- | | | |
|--|----------------------------|--|
| 1) Hydration | 4) TCI | 7) Avoiding Doxapram |
| 2) Avoidance of nitrous oxide | 5) Minimise use of opiates | 8) Using a regional technique when possible. |
| 3) Avoidance of high dose neostigmine (>2.5mg) | 6) Preoperative anxiolysis | 9) Prophylactic acupressure. |

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If patient is nauseated or vomiting:

- 1) Exclude **hypotension**; seek anaesthetist's assistance
- 2) Treat **pain** as per guideline
- 3) Give **ondansetron**, if not already given (do not repeat dose)
- 4) Call anaesthetist if PONV has not resolved
- 5) Anaesthetist to **check what was given so far**.

6) Anaesthetist to consider using **one** of the following agents (recommended doses and dose intervals given):

- a. Cyclizine 50mg slow IV bolus (over 5min) 8Hrly/prn
- b. Prochlorperazine (Stemetil) 12.5mg deep IM 8Hrly/prn
- c. Metoclopramide 10mg slow IV (over 5min) 8Hrly/prn **OR**
Domperidone 30mg PR b.d./prn
- d. Haloperidol 0.5mg IM 8Hrly/prn
- e. Propofol up tp 20mg IV titrated bolus (**to be given by anaesthetist only** and in stage 1 recovery)

7) If no response to one agent from the list above, then anaesthetist is to give **one more agent**.