

Robotic Surgery Cheat Sheet

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Setup Checklist

- 2nd IV setup
- OG tube
- Face padding

Pre-Op

Assess BMI/pulmonary status

(surgical conditions make ventilation challenging)

+/- Type and screen

Access

2nd IV (arms tucked)

Arterial line only for anticipated difficulty with ventilation or hemodynamics

Induction

Standard

Position

Pad face with foam

Gyn/pelvic surgery: Steep trendelenburg
Gastric/gall bladder: Reverse trendelenburg

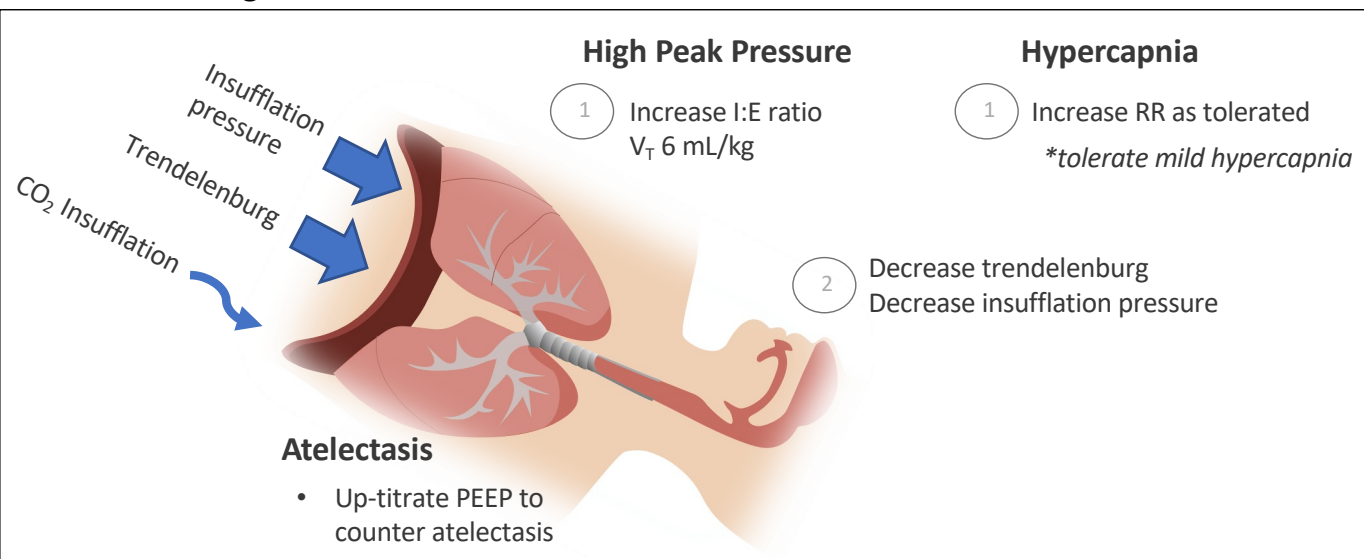
Extubation

Assess for subQ emphysema

Special Considerations

- * Maintain deep neuromuscular blockade while robot docked
- * Insufflation ↓ renal blood flow causing oliguria

Ventilator Management



Insufflation Complications

Immediate

- Severe bradycardia (vagal stimulation)
- Hypotension (↓ preload)
Normalizes in 15 minutes
- Mainstem intubation (diaphragm moves cephalad)
- Venous air embolism
- Capnothorax
- Trochar puncturing vessel/organ

Delayed

- Subcutaneous emphysema
Ensure satisfactory ventilation