1. Process/Procedure Description

Patients who require a splenectomy, or significant splenic embolization following trauma need lifetime monitoring and health-maintenance. Information will be provided to these trauma patients to allow for proper follow-up and healthcare maintenance by the Trauma Service.

2. Who Should Read This Process/Procedure?

Trauma Attending, surgery residents, Trauma NP

3. Process/Procedure

<table>
<thead>
<tr>
<th>Step</th>
<th>Process Instructions/Description:</th>
</tr>
</thead>
<tbody>
<tr>
<td>A.</td>
<td>Background</td>
</tr>
<tr>
<td></td>
<td>A patient who has his spleen removed (or had a significant portion embolized, as determined by the attending trauma physician) as a result of trauma, is more susceptible than the general population to certain serious infections. It is recommended that a specific group of immunizations be given immediately following and at specified times throughout the patient's life to help protect him against those infections.</td>
</tr>
<tr>
<td>B.</td>
<td>Recommended Vaccination Schedule:</td>
</tr>
<tr>
<td></td>
<td>The following schedule is in accordance with Erlanger's current formulary:</td>
</tr>
</tbody>
</table>
C. In-Hospital Vaccinations

While an in-patient on the trauma surgery service, the patient will receive his initial round of vaccinations. These are contained in the order set named EPHS Inpatient Post-splenectomy vaccines. They will be given once it is determined the patient is likely to be discharged in the next 24 hours.

D. At Discharge

At the time of the patient's discharge, they will be provided with verbal and written information regarding the recommended vaccination schedule. The patient's After-Visit Summary (AVS) will be populated with the dot phrase ".SPLENECTOMY" which will attach the following information to the patient's discharge paperwork:

"Post-splenectomy long-term management:
While in the hospital, you received vaccines to help prevent certain infections. These vaccines were for pneumococcal, meningococcal, and H. flu bacteria.
It is recommended that you get the following additional vaccines to help prevent infections long-term through your primary care provider or local health care center:
THIS IS YOUR RESPONSIBILITY
• Meningococcal vaccines should be repeated in 2 months and every 5 years thereafter
• Tetanus/diptheria vaccine should be repeated every 10 years
• Influenza vaccine should be repeated annually"

E. Post-surgery or hospitalization office/clinic follow-up

The recommended vaccination schedule will be reviewed with the patient at his follow-up visit in the trauma clinic or office, usually within 2 weeks of surgery or discharge. At that time, a pre-printed flyer with the vaccination schedule clearly contained will be provided to the patient for home use and reference.

### References:


---

**Approval Signatures**

<table>
<thead>
<tr>
<th>Step Description</th>
<th>Approver</th>
<th>Date</th>
</tr>
</thead>
</table>

---
Applicability

Erlanger Health - Baroness, Erlanger Health - Bledsoe, Erlanger Health - Children's, Erlanger Health - East, Erlanger Health - North, Erlanger Health - System