

PEDIATRIC SURGERY

Intestinal anastomosis (stapled)

Preference Card

1. Tack proximal and distal limbs of anastomosis together with 4-0 PDS at each end of proposed staple line.
2. Make enterotomy at antimesenteric side of each limb just proximal to the first stay stitch.
3. Pass GIA and fire. Inspect the mucosal aspect of anastomosis for bleeding.
4. Approximate the edges of enterotomy sites with Allis clamps and fire GIA just beyond it--keeping the staple line in line with the first. This stapling simultaneously closes anastomosis and resects the proximal bowel and mesentery.
5. Remove stay sutures.