

STAT Emergency General Surgery Consult Protocol

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This protocol is applicable to the timely notification of an emergent patient condition requiring STAT consultation of the Emergency General Surgery (EGS) Service.

CLINICAL MANAGEMENT

- A. Notify the EGS team immediately if a patient presents with any of the following known or suspected diagnoses:
 1. Unstable patient with high suspicion of surgical abdomen as source
 - a. Hypotension (SBP < 90, requiring vasopressors)
 - b. Persistent tachycardia (HR > 120)
 - c. Signs of end organ failure (mental status changes, renal failure, respiratory failure, etc.)
 2. Necrotizing soft tissue infection (NSTI) by physical exam or radiographic evidence
 3. Pneumoperitoneum (excluding contained perforation from diverticulitis or appendicitis)
 4. Mesenteric ischemia, pneumatosis intestinalis
- B. Place a "General Surgery" consult order and identify it as "STAT" in the electronic medical record --- see screenshot below
 - a. Include Emergency General Surgery in the "*reason for consult*," along with the indication for consult
- C. Send Urgent Perfect Serve message the first-call resident/APP for EGS
- D. Patients with a STAT consult will be seen by an EGS provider within 30 minutes of consult order time

- E. The EGS provider completing initial patient evaluation will document time the patient was seen in the EGS Consult note

- F. Patients requiring emergent surgical intervention will be prepared for the OR and the OR Lead will be notified following current protocols

A screenshot of a computerAI-generated content may be incorrect.

For all STAT or EMERGENT consults, the ordering provider is required to check "yes" and call the consulting provider. If a nurse is placing a STAT or URGENT consult order through a telephone order, the nurse is responsible for communicating the consult order to the consulting physician.

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