TO IMPROVE THE CARE PROVIDED TO PATIENTS ARRIVING IN HOSPITAL WITH ACUTE BOWEL OBSTRUCTION

**CT SCAN** with IV Contrast* should be undertaken and reported on promptly
* unless deemed inappropriate by a senior clinician

**PAIN** - assess and treat
* On arrival
* Throughout admission & refer to pain team if needed

**RISK ASSESSMENT** – should be undertaken to aid shared decision-making and risks associated with a laparotomy

**HYDRATION** – measure, document and treat
* On arrival
* Throughout admission

**NUTRITION** – undertake a MUST screen
* On arrival
* At least weekly throughout the admission
* At discharge
Obtain dietitian/nutrition input as needed

**ARRIVAL**

**CONSULTANT REVIEW** should occur within **1 HOUR** for HIGH RISK patients and within **14 HOURS** for all acute patients

**ADMIT** patients diagnosed with acute bowel obstruction under a **SURGICAL TEAM**

**RAPID** access to **THEATRE** should be available as needed

**TREATMENT**