Laparoscopic Splenectomy

1. Positioning: Right axillary roll. Place rolled blankets under left flank and thorax to angle patient 45 degrees to the right. Tape to table at hips and shoulders with padding underneath. Start with bed 45 degrees to the left (patient flat)

2. 5 mm Innerdyne trocar in infraumbilical (1), 5mm trocar in midline subxiphoid (2), 5mm in midline between 1 and 2 (3). Another 12mm trocar in LLQ at anterior axillary line (4) for harmonic scalpel, stapler, and Endobag.

3. Use 30 degree scope in 3.

4. Turn bed 45 degrees to the right (patient 90 degrees to the right) to allow spleen and stomach to hang down to the right.
5. Push up on inferior pole of spleen with blunt grasper via 2 and divide the spleno-colic ligaments with the harmonic scalpel in 4 and grasper in 1 using the continuous setting mostly and variable for visible vessels.


7. Get under the hilum with a Maryland via 4 then divide with the vascular endo GIA--use the roticulating version as this allows you to place it exactly where you want.

8. Divide remaining short gastrics then spleno-diaphragmatic attachments.

9. Place spleen into a large endo-bag. Needs to be placed at 4 without a trocar with some extension of the incision. Put the patient flat again.

10. Morcelate, taking care not to spill any spleen or getting a tear in the bag.

11. Irrigate.

12. Close the large trocar site with 2-0 PDS for the fascia. Dermabond for the skin at all the sites.