

## Week 3: Collaboration Café

### **Client Situation**

A 45-year-old woman named Harmony Hughes recently had a total hysterectomy with bilateral salpingo-oophorectomy to treat endometriosis. Two days after being released from the hospital, she comes in for a follow-up appointment and reports feeling fine with 3/10 pain and no infection. Her surgical scar is healing properly. Harmony has no known drug allergies, does not smoke, and occasionally drinks alcohol. Her vital signs are stable: blood pressure 107/75, heart rate 77, respiratory rate 17, oxygen saturation 98% on room air, and temperature 98.6° F. Harmony is currently taking hydrocodone 5 mg/acetaminophen 325 mg (Vicodin) every four hours as needed for pain.

### **Clinical Practice Guideline (CPG) Assessment**

According to Annals of Medicine, it necessitates uniform postoperative pain control, especially in the initial postoperative phase (Wu et al., 2023). Harmony's current hydrocodone/acetaminophen pain management after a hysterectomy is suitable for the first few days after the procedure, but as pain levels subside, switching to non-opioid alternatives like ibuprofen or acetaminophen alone should be taken into consideration to reduce the risk of opioid dependence.

Furthermore, Harmony is susceptible to surgical menopause due to her bilateral oophorectomy, according to the current study, women who have had hysterectomies, particularly those who had a hysterectomy before menopause, have a greater burden of menopausal symptoms (Chaudhary et al., 2023). To reduce these risks, the guideline suggests starting hormone replacement therapy (HRT), especially with estrogen therapy such as oral estradiol or transdermal estrogen.

### **Personal Professional Assessment**

In addition to starting hormone replacement therapy (HRT) to help address the hormonal deficiencies associated with surgical menopause, which would help reduce long-term risks like osteoporosis and cardiovascular complications, Harmony's clinical presentation and medical history suggest that she should continue to manage her pain with her current prescription while introducing non-opioid options as her pain subsides.

### **Additional Questions and What Else You Need To Know**