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Safe Positioning for Robotic-Assisted Laparoscopic Prostatectomy

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Robotic-assisted laparoscopic prostatectomy is a surgical procedure performed to eradicate prostate cancer. Use of robotic assistance technology results in better patient outcomes. This surgical approach creates unique challenges in patient positioning for the perioperative team because the patient is placed in the lithotomy with steep Trendelenburg position. Incorrect positioning can lead to nerve damage, pressure ulcers, and other complications.

"Use of shoulder restraints or braces is not recommended because of the documented occurrences of brachial plexus injuries."
- AORN J 94 (July 2011)

"Brachial plexus injuries are the second most common perioperative neuropathy, and they are more apt to occur for a patient in the steep Trendelenburg position."
- AORN J 94 (July 2011)

"Recent insurance company data show that 12% of medical malpractice claims have involved peripheral nerve injuries, and 57% of those claims were brachial plexus and ulnar nerve damage."
- AORN J 94 (July 2011)

"Sliding may cause dermal injuries and alters the original position of the extremities, which may then lead to nerve injuries. There is potential for abdominal wall and underlying structural injury if the patient slides cephalad with the robotic arms fixed in relation to the patient's abdomen. This extreme position makes the patient vulnerable to other positioning-related complications as well, such as deep vein thrombosis formation and compartment syndrome."
- AORN J 94 (July 2011)

"Correctly positioning patients is not only for the patient's well-being; it also can prevent staff member injuries and decrease facility costs related to lengthened hospital stays and treatment of injuries."
- AORN J 94 (July 2011)