**Appendix 1: Common bile duct stones clinical pathway**

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| **Only valid in**Specialty: Gastroenterology |
| **Inclusion criteria**Comment: the hospital ward is notified by means of registration forms about the patient’s admission to the clinical pathway Patients with common bile duct stones (ICD-10: K80.3/K80.5)Patients undergoing endoscopic choledocholithotomy (ICD-9-CM-3: 51.8802) |
| **Name** | **Sex** | **Age (yr)** | **Clinic No.** | **No. of admission** | **Date of admission** | **Date of discharge** |
|  | **Day 1** | **Day 2-3** | **Day 2-4** | **Day 3-5****(Postoperative day 1)** | **Day 4-6****(Postoperative day 2-3)** | **Day 5-10****（Discharged）** |
| **Diagnosis and treatment** | -Medical history collection and physical examination-Medical record writing-Patients’ conditions and complications assessments | -Make the rounds of the wards, planning the next treatment-Evaluation of indications and contraindications for endoscopic therapy- Propaganda and education for patients and their families-Preoperative preparation-Sign self-paid agreement | -Make the rounds of the wards-Records of ward round in three levels-ERCP operation-Postoperative checks-Fluid replacement therapy, broad-spectrum antibiotics uses | -Abdominal symptoms and signs check- Make the rounds of the wards, planning the next treatment according ERCP angiography-Abnormal laboratory indicators re-check- Propaganda and education | -Check the changes of abdominal symptoms and signs after eating / drinking water.- Make the rounds of the wards, planning the next treatment according ERCP angiography-Abnormal laboratory indicators re-check-Propaganda and education | - Make the rounds of the wards, planning the discharge or not- Notify patients and their families to discharge- Matters needing attention after discharge-Drug uses for discharged patients- Discharge records copy delivery-Reasons for continuing hospitalization |
| **Medical orders** | **Long-term**-Routine nursing in gastroenterology-Second grade care-First grade care-Low fat semi-liquid diet-Liquid diet**Temporary**-Blood, urine, stool routine test-Chem 20, AMS, blood type, factor Rh, infectious diseases (hepatitis, HIV, [TP-IgG](http://www.baidu.com/link?url=Y09q92D2YHvnY4sTPY-TXXBvQ7sArcl-g8mKa9g2IDScCUC6HDx1s8VuJs4Ed3uwcPT1a8D1ANfi0RrqY37NCdkFmbI7TowLOyCJ4rY0YCW&wd=&eqid=e7e9002300003f8a000000065bd80fba) etc,)-Abdominal ultrasonography, ECG, chest X-ray(Abdominal CT, MRCP on demand)-5% glucose injection (250 ml) + Polyene Phosphatidylcholine injection (4 ampul), ivgtt qd;5% glucose injection (250 mL) +Magnesium Isoglycyrrhizinate injection (4 ampul), ivgtt qd;NS (100 mL) + Lansoprazole (30 mg), ivgtt bid;NS (100 mL) + Pantoprazole (40 mg), ivgtt bid;NS (100 mL) + Esomeprazole Magnesium (40 mg), ivgtt bid; | **Long-term**-Routine nursing in gastroenterology-Second grade care-Low fat semi-liquid diet**Temporary****-**Fasting next morning**-**Iodine allergy test**-**Drugs: sedatives, spasmodic drugs, meglumine or organic iodine contrast media, anesthetic drugs**-**ERCP reservation | **Long-term**-Routine nursing in gastroenterology-First grade care-Preoperative fasting and water deprivation-Application of broad-spectrum antibiotics-Intravenous infusion**Temporary (Postoperative):**-Blood routine test (in 24 h)-Liver functions check and electrolyte examination-AMS check at 3 h, 6 h and 12 h after operation**Medication**Moxifloxacin (400 mg) ivgtt qd | **Long-term**-Routine nursing in gastroenterology-First grade care-Try drinking water-Application of broad-spectrum antibiotics-Intravenous infusion**Temporary**-Blood routine test; liver function and electrolytes examination on demand-AMS and lipase check | **Long-term**-Routine nursing in gastroenterology-Second grade care-Liquid diet-Application of broad-spectrum antibiotics-Intravenous infusion**Temporary**-Blood routine test, liver function and electrolytes examination on demand-AMS and lipase check-Abdominal ultrasound | **Long term**-Drug uses for discharged:Lansoprazole (30mg) po qd; Sodium Rabeprazole Enteric-coated Tablets (10 mg) po qd; Diammonium Glycyrrhizinate Enteric-coated Capsules (150 mg) po tid |
| **Nursing care** | -Admission procedure-Admission education | -Venous blood sampling, basic nursing in life and psychology- Preparation for endoscopy examination | -Basic nursing in life and psychology-Postoperative checks | -Basic nursing in life and psychology-Medication monitoring | -Basic nursing in life and psychology-Medication monitoring | -Discharge procedure, hospital costs-Drugs collection |
| **Disease variation records** | -No-YesReason: | -No-YesReason: | -No-YesReason: | -No-YesReason: | -No-YesReason: | -No-YesReason: |
| **Nurses signatures** |  |  |  |  |  |  |
| **Physicians signatures** |  |  |  |  |  |  |

 AMS: Serum amylase; ECG: Electrocardiogram; NS: Normal saline.