

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

<b>Only valid in</b>						
Specialty: Gastroenterology						
<b>Inclusion criteria</b>						
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 )
<b>Diagnosis and treatment</b>	-Medical history collection and physical examination -Medical record	-Make the rounds of the wards, planning the next treatment	-Make the rounds of the wards -Records of ward round in	-Abdominal symptoms and signs check - Make the rounds of the	-Check the changes of abdominal symptoms and signs after eating	- Make the rounds of the wards, planning the discharge or not

	<p>writing</p> <p>-Patients' conditions and complications assessments</p>	<p>-Evaluation of indications and contraindications for endoscopic therapy</p> <p>- Propaganda and education for patients and their families</p> <p>-Preoperative preparation</p> <p>-Sign self-paid agreement</p>	<p>three levels</p> <p>-ERCP operation</p> <p>-Postoperative checks</p> <p>-Fluid replacement therapy, broad-spectrum antibiotics uses</p>	<p>wards, planning the next treatment according ERCP angiography</p> <p>-Abnormal laboratory indicators re-check</p> <p>- Propaganda and education</p>	<p>/ drinking water.</p> <p>- Make the rounds of the wards, planning the next treatment according ERCP angiography</p> <p>-Abnormal laboratory indicators re-check</p> <p>-Propaganda and education</p>	<p>- Notify patients and their families to discharge</p> <p>- Matters needing attention after discharge</p> <p>-Drug uses for discharged patients</p> <p>- Discharge records copy delivery</p> <p>-Reasons for continuing hospitalization</p>
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<b>Medical orders</b>	<b>Long-term</b> -Routine nursing in gastroenterology -Second grade care -First grade care -Low fat semi-liquid diet -Liquid diet <b>Temporary</b> -Blood, urine, stool routine test -Chem 20, AMS, blood type, factor Rh, infectious diseases (hepatitis, HIV, TP-IgG etc.) -Abdominal	<b>Long-term</b> -Routine nursing in gastroenterology -Second grade care -Low fat semi-liquid diet <b>Temporary</b> -Fasting next morning -Iodine allergy test -Drugs: sedatives, spasmodic drugs,	<b>Long-term</b> -Routine nursing in gastroenterology -First grade care -Preoperative fasting and water deprivation -Application of broad-spectrum antibiotics -Intravenous infusion -Intravenous infusion <b>Temporary</b> <b>(Postoperative):</b> -Blood routine	<b>Long-term</b> -Routine nursing in gastroenterology -First grade care -Try drinking water -Application of broad-spectrum antibiotics -Intravenous infusion <b>Temporary</b> -Blood routine test; liver function and electrolytes	<b>Long-term</b> -Routine nursing in gastroenterology -Second grade care -Liquid diet -Application of broad-spectrum antibiotics -Intravenous infusion <b>Temporary</b> -Blood routine test, liver function and electrolytes	<b>Long term</b> -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
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	<p>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) +</p>	<p>meglumine or organic iodine contrast media, anesthetic drugs -ERCP reservation</p>	<p>test (in 24 h) -Liver functions check and electrolyte examination -AMS check at 3 h, 6 h and 12 h after operation <b>Medication</b> Moxifloxacin (400 mg) ivgtt qd</p>	<p>examination on demand -AMS and lipase check</p>	<p>examination on demand -AMS and lipase check -Abdominal ultrasound</p>	
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	Lansoprazole (30 mg), ivgtt bid; NS (100 mL) + Pantoprazole (40 mg), ivgtt bid; NS (100 mL) + Esomeprazole Magnesium (40 mg), ivgtt bid;					
<b>Nursing care</b>	-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

<b>Disease variation records</b>	-No -Yes Reason:	-No -Yes Reason:	-No -Yes Reason:	-No -Yes Reason:	-No -Yes Reason:	-No -Yes Reason:
<b>Nurses signatures</b>						
<b>Physicians signatures</b>						

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