



SNS COLLEGE OF NURSING
Saravanampatti (po), coimbatore.



DEPARTMENT OF NURSING
COURSE NAME : BSC (NURSING) II YEAR
SUBJECT :MEDICAL SURGICAL NURSING I
UNIT: IV DISORDERS OF DIGESTIVE SYSTEM
TOPIC : CHOLELITHIASIS



ANATOMY AND PHYSIOLOGY



- The gallbladder is a small, pear-shaped organ under the liver. Both the liver and the gallbladder are behind the right lower ribs. In adults, the gallbladder is usually about 3 to 4 inches long and normally no wider than an inch.



ANATOMY AND PHYSIOLOGY



- The gallbladder concentrates and stores bile, a fluid made in the liver. Bile helps digest the fats in foods as they pass through the small intestine. Bile is made by the liver and is either sent into ducts that carry it to the small intestine, or stored in the gallbladder and released later.



ANATOMY AND PHYSIOLOGY



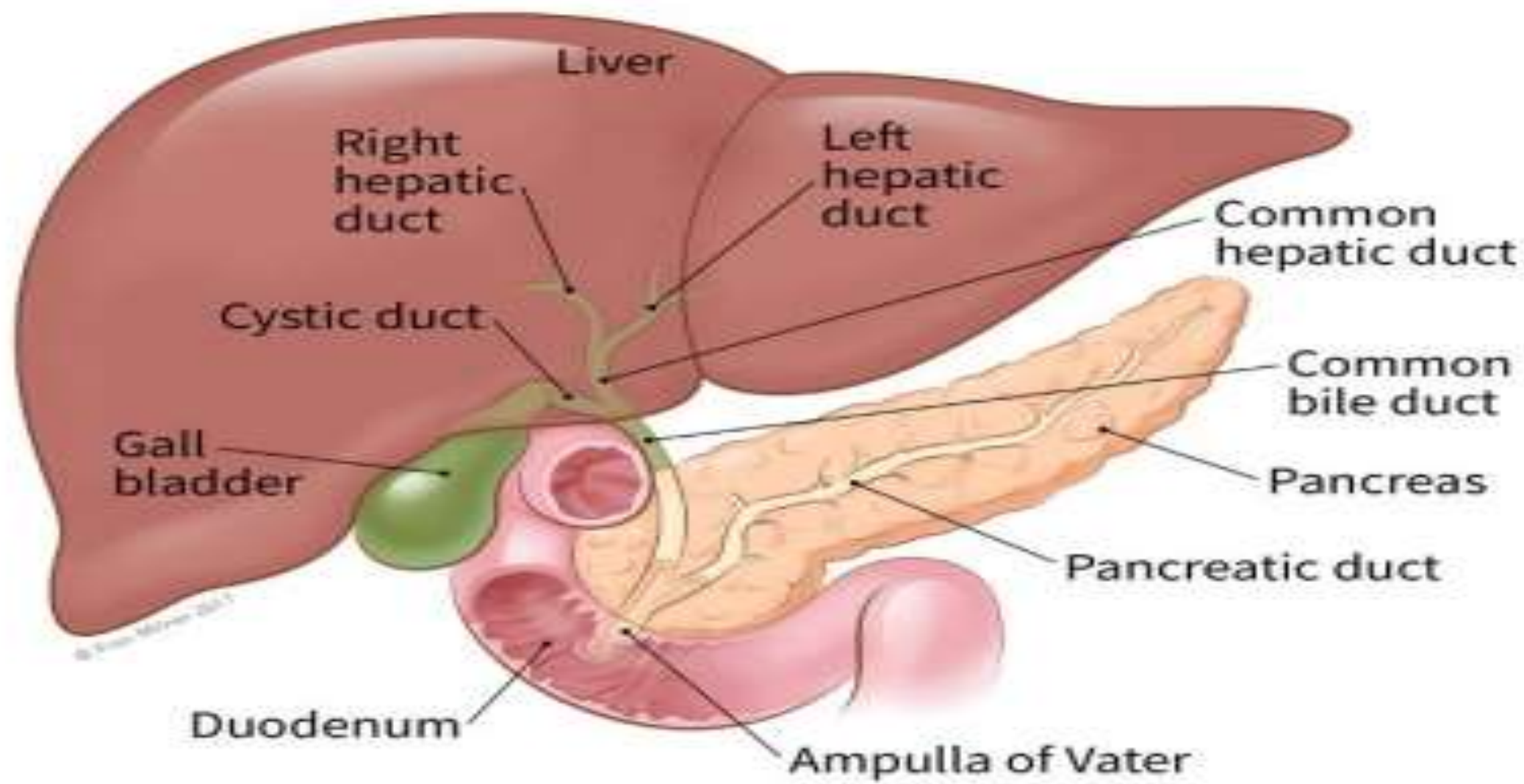
- ❖ When food (especially fatty food) is being digested, the gallbladder squeezes and sends bile through a small tube called the **cystic duct**.
- ❖ The cystic duct joins up with the common hepatic duct (which comes from the liver) to form the **common bile duct**.



ANATOMY AND PHYSIOLOGY



- ❖ The common bile duct joins with the main duct from the pancreas (the **pancreatic duct**) to empty into the first part of the small intestine (the duodenum) at the **ampulla of Vater**.
- ❖ The gallbladder helps digest food, but you don't need it to live. Many people have their gallbladders removed and go on to live normal lives.





DEFINITION

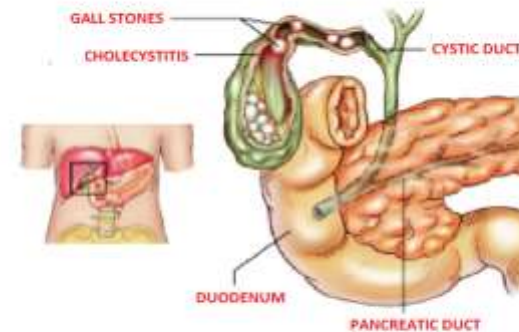


- The presence of stones in the gallbladder is referred to as cholelithiasis, from the Greek chol- (bile) + lith- (stone) + -iasis (process). If gallstones migrate into the ducts of the biliary tract, the condition is referred to as choledocholithiasis

DEFINITION

- Cholelithiasis is a condition characterized by the formation of stone in the gall bladder.

CHOLELITHIASIS



WWW.NURSEINFO.IN

WWW.CANESTAR.COM

TYPES OF GALL STONES

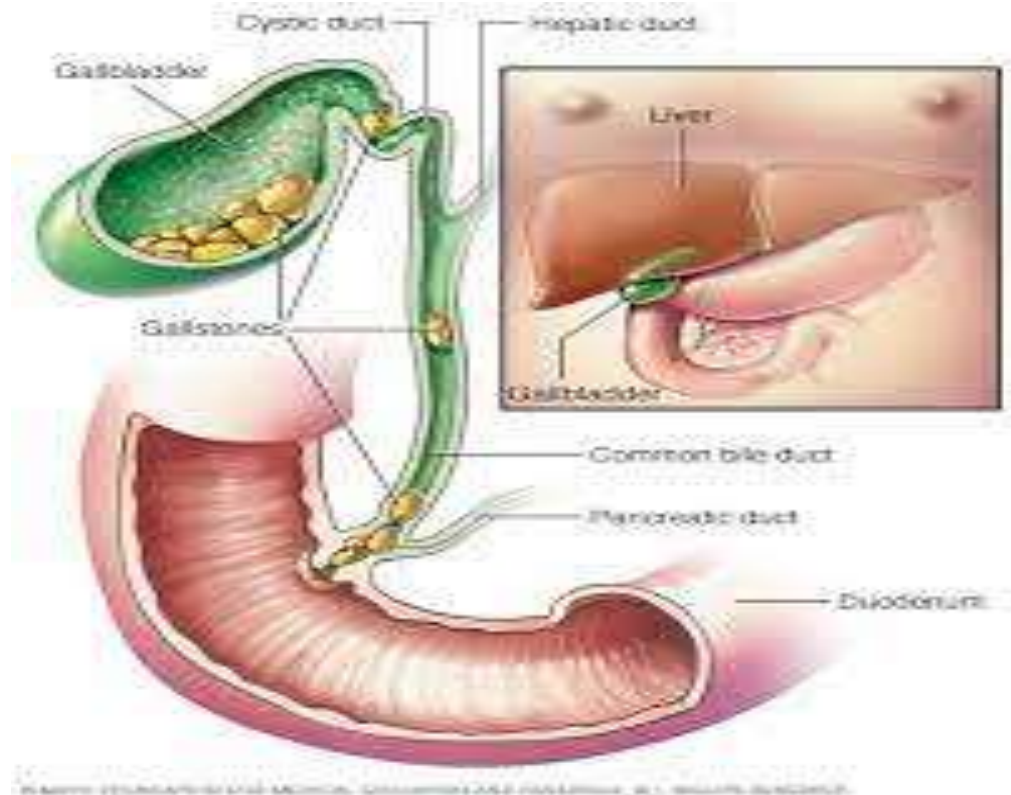
1. Chole Sterol Stones

2. Pigment Stones

Black pigment stones

Brown stones

3. Mixed Stones





ETIOLOGY AND RISK FACTORS



- Cirrhosis of Liver
- Diabetes
- Infections of biliary tract
- Disease which cause RBC destruction
- Bone marrow transplantation
- Use of oral contraceptives
- Prolonged IV feeding



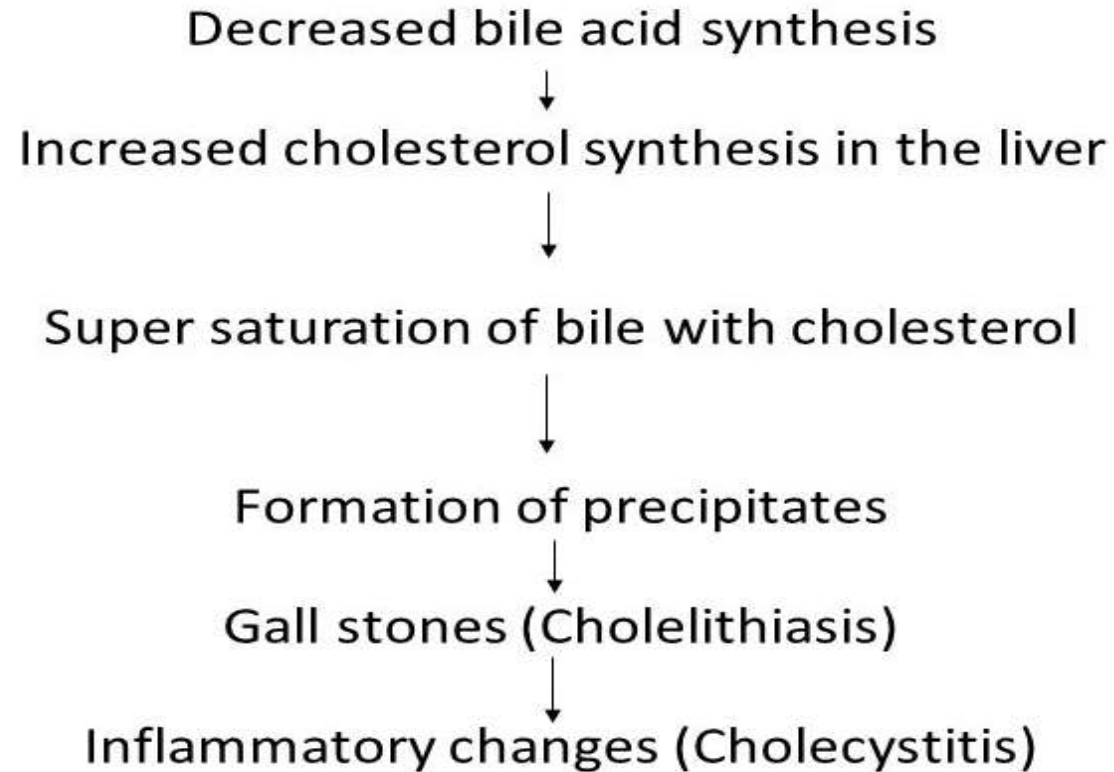
ASSESSMENT



- Define cholelithiasis
- Enumerate the types of gall stones



PATHOPHYSIOLOGY





SIGNS AND SYMPTOMS



- Sharp or dull pain in upper abdominal region
- Clay- colored stools
- Yellowish coloration of skin



DIAGNOSTIC EVALUATION



- History collection
- Physical Examination
- Liver function tests
- Gall bladder radionuclide scan
- Percutaneous transhepatic cholangio-gram(PTCA)
- Pancreatic enzymes analysis



ASSESSMENT



- List down the signs and symptoms of cholelithiasis
- Enumerate the diagnostic tests

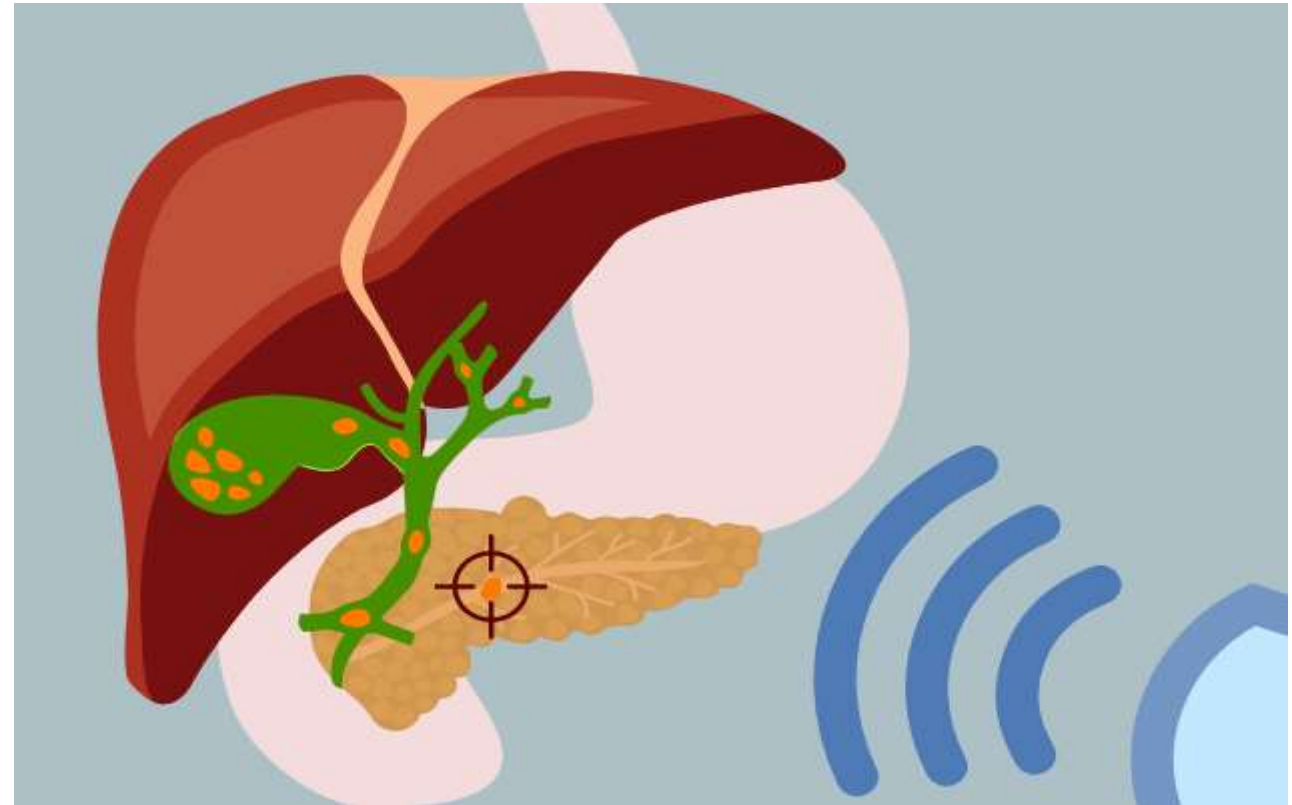
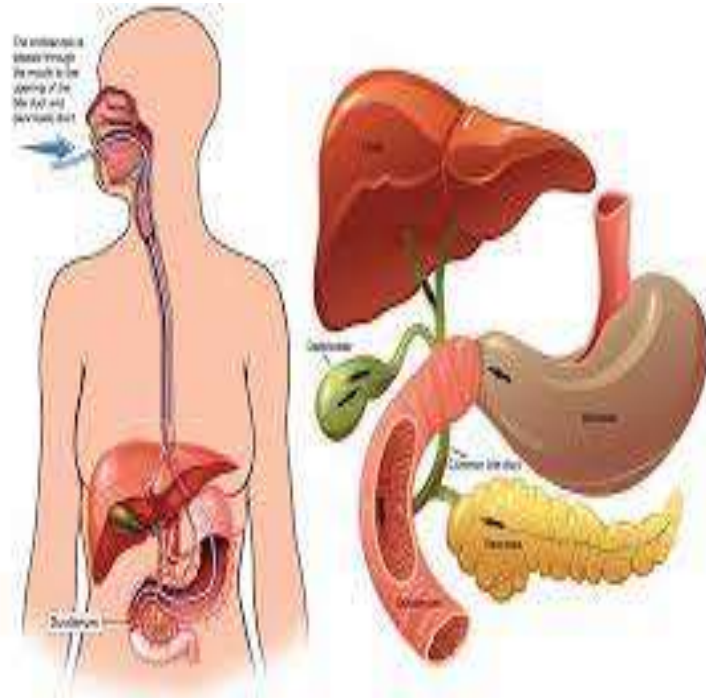


SURGICAL MANAGEMENT



- Laparoscopic cholecystectomy
- Open cholecystectomy
- Endoscopic retrograde cholangio-pancreatography (ERCP)
- Shock wave lithotripsy (ESWL) is indicated when surgery is not possible

SURGICAL MANAGEMENT





PATIENT EDUCATION



- Managing Pain
- Sitting upright in bed or a chair or walking may ease the discomfort.
- Analgesic medications as needed & as prescribed
- Report to surgeon if pain is unrelieved even with analgesic use.
- Resuming Activity-
- Light exercise (walking) immediately. Shower or bath after 1 or 2 days.
- Drive a car after 3 or 4 days. Avoid lifting objects exceeding 5 pounds after surgery, usually for 1 week. Caring for the Wound



PATIENT EDUCATION



- Check puncture site daily for signs of infection. Wash puncture site with mild soap & water. Allow special adhesive strips on the puncture site to fall off. Do not pull them off.
- Resuming Eating
- Resume normal diet.



PATIENT EDUCATION



- If you had fat intolerance before surgery, gradually add fat back into your diet in small increments. Follow-Up Care
- Report any sign & symptoms of infection at or around the puncture site: redness, tenderness, swelling, heat, or drainage.
- Fever of 37.7°C (100°F) or more for 2 consecutive days.
- Nausea, vomiting, or abdominal pain



ASSESSMENT



- DEFINE THE CHOLELITHIASIS
- LIST DOWN MANAGEMENT FEATURES
- DESCRIBE THE NURSING MEASURES



REFERENCES



- BRUNNER & SUDDARTH, MEDICAL SURGICAL NURSING, 1ST EDITION
- LEWIS'S, MEDICAL SURGICAL NURSING, 9TH EDITION
- DAVIDSON'S, PRINCIPLES AND PRACTICE OF NURSING, 24TH EDITION



*Thank
you*