UNM EGS- Medicine Guidelines
Admission Process for Gallbladder Pathology

Acute Cholecystitis
(+/- Choledocholithiasis)

Primary choledocholithias

Primary Cholangitis
Tokyo Guidelines 2018

Mild Acute Cholangitis
- Total bilirubin>2.0
- Abnormal LFTs
- Biliary dilation or evidence of stone on imaging
- No SIRS or Sepsis

Admit to Surgery if patient is a surgical candidate for cholecystectomy and laparoscopic CBD exploration.

Admit to medicine if patient is not a surgical candidate or if patient already had cholecystectomy (otherwise admit to surgery).

Moderate cholangitis
At least 2 of the following
- WBC<4000 or >12000
- Fever>38.0
- Age>75
- Total bilirubin>5.0

Severe Cholangitis
Evidence of organ Dysfunction (Neurologic, cardiovascular, respiratory, renal, hepatic, hematologic)

Admit to medicine for initial management

(GI consult may be required for biliary drainage)

Consult EGS prior to discharge to evaluate for cholecystectomy

Gallstone Pancreatitis

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