

PEDIATRIC SURGERY

Laparoscopic Cholecystectomy

Preference Card

1. 4 5 mm trocars: infraumbilical, subxiphoid--just to the left of midline (more to the left in infants), between the infraumbilical and subxiphoid, and R side (for grasping the gallbladder). The subxiphoid usually gets expanded to a 12 to allow the bigger clip applier and to allow the gallbladder to be removed.
2. Grasp the gallbladder with a toother grasper via the R side trocar, pull the fundus over the liver and clamp the grasper to the drapes so that you don't need to hole it.
3. Dissect out the duct and artery with a Maryland in your right hand and a blunt grasper in the left. Keep moving the left hand instrument to maintain good traction/countertraction.
4. Obtain a cholangiogram if there is concern for a CBD stone--elevated LFT's, gallstone pancreatitis, etc.
5. Divide the duct and artery then dissect the gallbladder out of the fossa with the hook or Maryland or scissors.
6. Remove the gallbladder via the sub-xiphoid site which is usually expanded to a 12.
7. Close the trocar sites with dermabond.