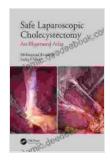
# Safe Laparoscopic Cholecystectomy: An Illustrated Atlas

Laparoscopic cholecystectomy (LC) is a surgical procedure to remove the gallbladder. It is the most common surgery performed for gallbladder disease. LC is a minimally invasive procedure that is typically performed through four small incisions in the abdomen. The surgeon inserts a laparoscope, a thin lighted tube with a camera, into one of the incisions. The other incisions are used to insert surgical instruments. The surgeon then uses the laparoscope to visualize the gallbladder and remove it.

LC is a safe and effective procedure with a low complication rate. However, as with any surgery, there are some risks involved. The most common complications of LC include bleeding, infection, and damage to the bile ducts.



#### Safe Laparoscopic Cholecystectomy: An Illustrated

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This illustrated atlas provides a comprehensive guide to the safe performance of LC. It includes detailed illustrations of the anatomy of the gallbladder and surrounding structures, as well as step-by-step instructions for the surgical procedure.

#### Anatomy of the Gallbladder

The gallbladder is a small, pear-shaped organ located on the underside of the liver. It stores bile, a fluid that helps to digest fats. The gallbladder is connected to the liver by the cystic duct and to the small intestine by the common bile duct.

The gallbladder is surrounded by several important structures, including the liver, the stomach, the duodenum, and the pancreas. The cystic artery runs along the cystic duct and supplies blood to the gallbladder. The common bile duct is located behind the head of the pancreas.

#### Indications for Laparoscopic Cholecystectomy

LC is indicated for the treatment of gallbladder disease. Gallbladder disease is a general term for a variety of conditions that affect the gallbladder, including:

\* Cholelithiasis (gallstones) \* Cholecystitis (inflammation of the gallbladder)
\* Cholangitis (infection of the bile ducts) \* Gallbladder cancer

LC is the preferred treatment for most cases of gallbladder disease. It is a minimally invasive procedure that is associated with a low complication rate.

#### **Contraindications to Laparoscopic Cholecystectomy**

LC is contraindicated in patients with certain medical conditions, including:

\* Severe heart disease \* Severe lung disease \* Active infection \* Pregnancy \* Advanced cancer

#### **Preoperative Preparation**

Prior to LC, the patient will undergo a physical examination and blood tests. The patient may also be given a CT scan or MRI to visualize the gallbladder and surrounding structures.

The patient will be instructed to fast for 8 hours prior to surgery. The patient will also be given antibiotics to prevent infection.

#### **Surgical Procedure**

LC is typically performed under general anesthesia. The patient is placed in a supine position on the operating table. The abdomen is shaved and prepped with an antiseptic solution.

The surgeon makes four small incisions in the abdomen. The first incision is made in the umbilicus. The other incisions are made in the right upper quadrant of the abdomen.

The surgeon inserts a laparoscope into one of the incisions. The other incisions are used to insert surgical instruments. The surgeon then uses the laparoscope to visualize the gallbladder and surrounding structures.

The surgeon carefully dissects the gallbladder from the surrounding structures. The cystic duct and cystic artery are then divided. The gallbladder is then removed from the abdomen.

The surgeon then closes the incisions with sutures or staples. The patient is then taken to the recovery room.

#### **Postoperative Care**

After surgery, the patient will be taken to the recovery room. The patient will be monitored for bleeding, infection, and other complications. The patient will typically be discharged from the hospital the same day or the following day.

The patient will be given pain medication to relieve discomfort. The patient will also be instructed to rest and avoid strenuous activity for several weeks.

The patient will be seen by a doctor for a follow-up visit within 1-2 weeks after surgery. The doctor will check the incisions and remove the sutures or staples.

#### **Complications of Laparoscopic Cholecystectomy**

The most common complications of LC include:

\* Bleeding \* Infection \* Damage to the bile ducts \* Nausea and vomiting \* Diarrhea \* Constipation \* Gas pain \* Shoulder pain

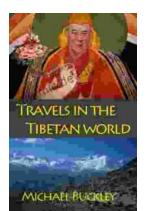
These complications are usually minor and resolve with treatment. However, in some cases, these complications can be serious and require additional treatment.

LC is a safe and effective procedure for the treatment of gallbladder disease. It is a minimally invasive procedure that is associated with a low

complication rate. However, as with any surgery, there are some risks involved. The patient should discuss the risks and benefits of LC with their doctor before making a decision about surgery.







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