

1. Technique general

- ☐ Open surgery
- ☐ MIS - Cholangiography before Kasai
- ☐ MIS complete

2. Cholangiography

- ☐ Obligatory
- ☐ When ERCP not available or inconclusive
- ☐ Only when macroscopic inspection of the hepatoduodenal ligament is inconclusive
- ☐ Never

3. Do you perform indocyanine green cholangiogram?

- ☐ Yes
- ☐ No

4. Role of indocyanine green cholangiogram?

5. Full assessment for associated pathology (BASM, malrotation, etc.)

- ☐ Yes
- ☐ No

6. Survey answered by Kasai surgeon

- ☐ Yes
- ☐ No

Open procedure

7. Mobilisation of the liver

- ☐ Total
- ☐ Partial
- ☐ No

8. Using magnification during the dissection of the porta hepatis

- ☐ Yes
- ☐ No

9. Using knife during the dissection of the porta hepatis

- ☐ Yes
- ☐ No

10. Using bipolar coagulation during the dissection of the porta hepatis

- ☐ Yes
- ☐ No

11. Exposure of the Recessus Rex

- ☐ Yes
- ☐ No
- ☐ Optional

12. Do you perform extended dissection (up to first branching of the portal vein)

- ☐ Yes
- ☐ No
- ☐ Optional

13. Role of indocyanine green to evaluate dissection of liver surface

14. Other techniques during dissection of liver surface (please specify)

15. Roux-n-Y length

- ☐ < 25cm
- ☐ 25 - 50cm
- ☐ > 50cm

16. Construction of valve

- ☐ Yes
- ☐ No

17. If yes, that type of valve

18. Roux-en-Y technique

- ☐ Side-to-Side
- ☐ End-to-Side

19. Roux-en-Y anastomosis

- ☐ Stapled
- ☐ Hand-sewn

20. If hand-sewn

- ☐ Running sutures
- ☐ Interrupted sutures

21. Position of the Roux-n-Y-loop with regard to later liver transplantation

- ☐ retrocolic
- ☐ antecolic

22. Kasai anastomosis

- ☐ Interrupted sutures
- ☐ Running sutures
- ☐ Both (please specify)

23. Kasai anastomosis technique

- ☐ End-to-Side
- ☐ End-to-End
- ☐ Both (please specify)

24. Size of sutures

- ☐ 5/0
- ☐ 6/0
- ☐ 7/0
- ☐ Other (please specify)

25. Placement of drain

- ☐ Yes
- ☐ No
- ☐ Optional

26. Liver biopsy (simultaneously with the Kasai)

- ☐ Wedge
- ☐ Needle
- ☐ Both
- ☐ No biopsy

27. Pathological assessment of excised portal plate

- ☐ Yes
- ☐ No

28. Bio bank

☐ Yes

☐ No

29. Duration of open Kasai

- ☐ < 120 min
- ☐ 120 - 240 min
- ☐ > 240 min

30. Duration of MIS Kasai

- ☐ < 120 min
- ☐ 120 - 240 min
- ☐ > 240 min

31. Perioperative prophylaxis - Substance:

32. Duration of perioperative prophylaxis

- ☐ 1 - 3 days
- ☐ 1 week
- ☐ 2 weeks
- ☐ > 2 weeks

33. Postoperative nasogastric tube

- ☐ Yes
- ☐ No

34. Start feeding

- ☐ Next day
- ☐ After bowel movement
- ☐ Other indicator (please specify)

35. Tube feeding

- ☐ Yes
- ☐ No
- ☐ Optional

36. Type of feeding

- ☐ Breast milk
- ☐ High MCT-containing formula
- ☐ Other (please specify)

37. Corticosteroids

☐ Yes

☐ No

38. If yes, please specify substance

39. Dosage tapered, please specify

☐ 1 week

☐ 2 weeks

☐ 2 - 4 weeks

☐ > 4 weeks

40. Immunoglobuline

☐ Yes

☐ No

41. Dosage and Duration of Immunoglobuline

42. Farnesoid X receptor (FXR) agonist

☐ Yes

☐ No

43. Dosage and Duration of Farnesoid X receptor (FXR) agonist

44. Ileal bile acid transporter/ apical sodium-bile acid transporter (IBAT,ASBT) inhibitors

☐ Yes

☐ No

45. Dosage and Duration of IBAT / ASBT inhibitors

46. Others/experimental therapy of interest (please specify)

47. Ursodeoxycholic acid

☐ Yes

☐ No

48. Ursodeoxycholic acid treatment duration

49. Antibiotic cholangitis prophylaxis

☐ Yes

☐ No

50. Type and duration of antibiotic treatment

51. Routine follow-up schedule

☐ Yes

☐ No

52. Follow-up schedule - Duration

53. Who is involved in the follow-up

☐ Pediatric gastroenterology

☐ Pediatric surgery

☐ Other (please specify)

54. For patients, who survive with native liver, is there a transition program to adult hepatology established

☐ Yes

☐ No

55. Is the Kasai surgeon involved in liver transplantation

☐ Yes

☐ No