

Endoscopic biliary drainage in altered anatomy: an Italian survey.

Section S1: expertise of endoscopic centers

How many ERCP/year are performed in your Center?

- < 100 ☐
- 100-250 ☐
- 250-400 ☐
- >400 ☐

How many EUS±FNA/FNB per year are performed in your Center?

- < 250 ☐
- 250-500 ☐
- 500-750 ☐
- >750 ☐

How many interventional EUS/year are performed in your Center?

- < 10 ☐
- 10-20 ☐
- 20-50 ☐
- >50 ☐

Is interventional radiology available in your Center?

- Yes ☐
- No ☐

Is biliopancreatic surgery available in your Center?

- Yes ☐
- No ☐

Is device assisted enteroscopy available in your Center?

- Yes ☐
- No ☐

Which is the rate of post-ERCP pancreatitis in your Center?

- <5% ☐
- 5-10% ☐
- >10% ☐
- NA ☐

Which is the biliary cannulation rate in your Center?

- <80% ☐
- 80-90% ☐
- >90% ☐
- NA ☐

Do you perform EUS-guided FNA/FNB?

- Yes ☐

No ☐

If yes which is the rate of diagnostic tissue sampling ?

- <75 % ☐
- 75-85% ☐
- 85-90% ☐
- >90% ☐

Do you perform EUS guided drainage?

Yes ☐

No ☐

If yes which type of procedure?

- Drainage of pancreatic pseudocyst/walled-off necrosis ☐
- Drainage of gallbladder ☐
- Choledocoduodenostomy ☐
- Hepaticogastrostomy ☐
- Gastrojejunostomy ☐

Do you perform biliary drainage in patients with upper GI altered anatomy?

Yes ☐

No ☐

If Yes in which type of surgical reconstruction?

- Billroth II ☐
- Roux-en Y ☐
- Roux-en-Y gastric bypass ☐
- Post DCP/Whipple ☐
- Others ☐ (specify)

Is your Center a referral for endoscopic biliary drainage in altered anatomy?

Yes ☐

No ☐

Do you refer patients for endoscopic biliary drainage in altered anatomy to other centers?

Yes ☐

No ☐

Do you refer patients for endoscopic biliary drainage in altered anatomy to other centers only if first attempt fails?

Yes ☐

No ☐

How many endoscopic biliary drainage/year are performed in your Center in patients with altered anatomy?
Number:

Section S2: Biliary drainage approach in case of Billroth-II reconstruction

Which is your first line endoscopic biliary drainage approach in patients with benign disease?

Conventional duodenoscopy ☐
Device assisted enteroscopy ☐
Pediatric colonoscopy or operative gastroscope or short enteroscopy ☐
Laparoscopic assisted ☐
EUS- BD ☐
Percutaneous BD ☐
Surgical Rendez-vous ☐
Radiological Rendez-vous ☐
EUS-guided Rendez-vous ☐
Referral to other center ☐

And, in case of failure?

Conventional duodenoscopy ☐
Device assisted enteroscopy ☐
Pediatric colonoscopy or operative gastroscope or short enteroscopy ☐
Laparoscopic assisted ☐
EUS- BD ☐
Percutaneous BD ☐
Surgical Rendez-vous ☐
Radiological Rendez-vous ☐
EUS-guided Rendez-vous ☐
Referral to other center ☐

Which is your first line endoscopic biliary drainage approach in patients with malignant disease?

Conventional duodenoscopy ☐
Device assisted enteroscopy ☐
Pediatric colonoscopy or operative gastroscope or short enteroscopy ☐
Laparoscopic assisted ☐
EUS- BD ☐
Percutaneous BD ☐
Surgical Rendez-vous ☐
Radiological Rendez-vous ☐
EUS-guided Rendez-vous ☐
Referral to other center ☐

And, in case of failure?

Conventional duodenoscopy ☐
Device assisted enteroscopy ☐
Pediatric colonoscopy or operative gastroscope or short enteroscopy ☐
Laparoscopic assisted ☐
EUS- BD ☐
Percutaneous BD ☐
Surgical Rendez-vous ☐
Radiological Rendez-vous ☐
EUS-guided Rendez-vous ☐
Referral to other center ☐

Section S3: Biliary drainage approach in case of Roux en Y reconstruction reconstruction:

Which is your first line endoscopic biliary drainage approach in patients with benign indication?

- Device assisted enteroscopy ☐
- Pediatric colonoscope or short enteroscope ☐
- Laparoscopic assisted ☐
- EUS- BD ☐
- EUS-gastrojejunostomy assisted ERCP ☐
- Percutaneous BD ☐
- EUS-guided Rendez-vous ☐
- Referral to other center ☐

And, in case of failure?

- Device assisted enteroscopy ☐
- Pediatric colonoscope or short enteroscope ☐
- Laparoscopic assisted ☐
- EUS- BD ☐
- EUS-gastrojejunostomy assisted ERCP ☐
- Percutaneous BD ☐
- EUS-guided Rendez-vous ☐
- Referral to other center ☐

Which is your first line endoscopic biliary drainage approach in patients with malignant indication?

- Device assisted enteroscopy ☐
- Pediatric colonoscope or short enteroscope ☐
- Laparoscopic assisted ☐
- EUS- BD ☐
- EUS-gastrojejunostomy assisted ERCP ☐
- Percutaneous BD ☐
- EUS-guided Rendez-vous ☐
- Referral to other center ☐

And, in case of failure?

- Device assisted enteroscopy ☐
- Pediatric colonoscope or short enteroscope ☐
- Laparoscopic assisted ☐
- EUS- BD ☐
- EUS-gastrojejunostomy assisted ERCP ☐
- Percutaneous BD ☐
- EUS-guided Rendez-vous ☐
- Referral to other center ☐