

MY TIPS AND TRICKS FOR

A SUCCESSFUL ERCP: THE NURSE'S VIEW

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**PROPER
PREPARATION
PREVENTS
POOR
PERFORMANCE**

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Take 5 or 10 minutes to prepare

Medical history, allergies, medication

Restock materials

ANESTHESIA

VS

SEDATION

ANESTHESIA **vs** **SEDATION**

Conscious sedation = loss of concentration



**parameters, communication,
securing stable position**

= extra set of hands needed, stress!

Anesthesia = anesthesiologist offers you the time you need



Peri-procedural precautions

lactated Ringer's solution

drip: 1,5ml/kg/h during and for 8 hours after ERCP (or more aggressive)

Park et al., Endoscopy 2018

indomethacin suppository

During ERCP

need to place pancreatic stent?

preloaded tapered tip sphincterotomes

SPLIT HAPPENS

SHORT WIRE SYSTEM vs LONG WIRE SYSTEM

Long wires

**drop on floor + manipulation
tangle → contaminated**



Short wires

**lock device
requires less manipulation
reduces risk of contamination
saves time!**



FLUSH IT

(FLUSH IT REAL GOOD)

FLUSH IT

(FLUSH IT REAL GOOD)

Contrast agent = high density = difficulties flushing

Mixture with saline solution

1:1 ratio = lower density = happy nurse

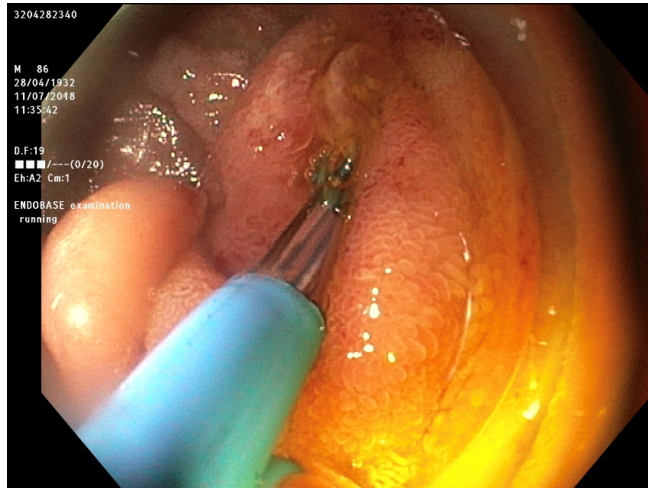
ratio depends on your X-ray machine

THINK OUT OF THE BOX

BE CREATIVE

Papilla in a duodenal diverticulum?

How about a forward-viewing therapeutic scope with cap?



BE CREATIVE

Papilla in a duodenal diverticulum?

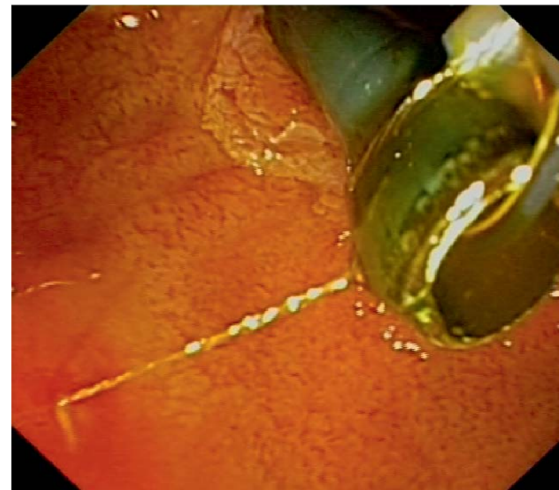
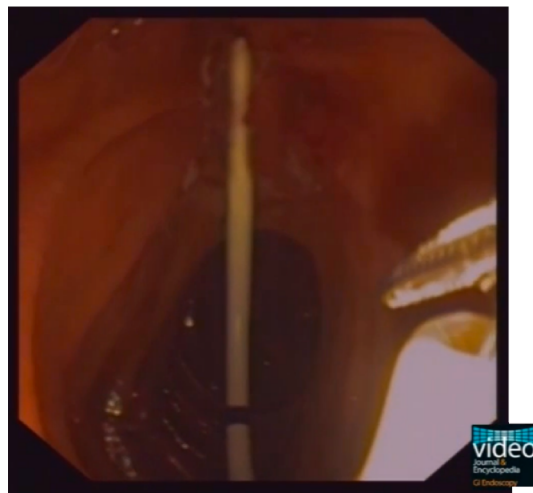
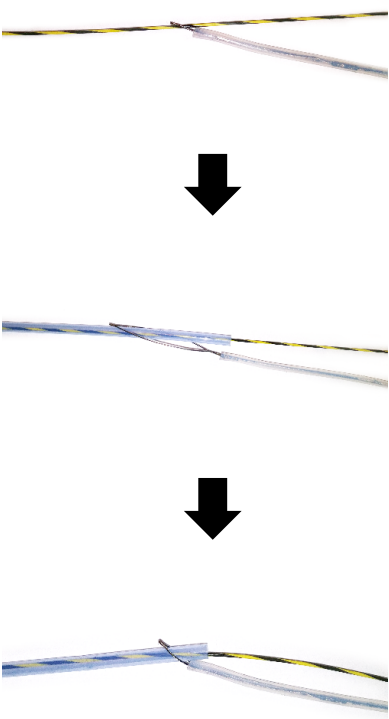
How about a forward-viewing therapeutic scope?

Sideways rotating sphincterotomes

BE CREATIVE

OTW stent exchange using a simple snare

Albert JG., Zangos S., Friedrich-Rust M. (2013) Over-The-Wire Stent Exchange using a simple snare technique in Endoscopic Retrograde Cholangiopancreatography



Copyright picture:
https://www.researchgate.net/Removal-of-a-plastic-stent-over-the-wire-using-a-snare-After-stent-cannulation-using_fig3_51167338

THANK YOU FOR YOUR ATTENTION

Any questions?

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