

SMALL-BOWEL OBSTRUCTION

- Adhesions
- Incarcerated hernias
- Intussusception
- Volvulus
- Strictures
- Gallstone ileus
- External or intrinsic compression
- Foreign bodies

MECKEL DIVERTICULUM.

- most common congenital anomaly of the GI
- failure of the vitelline or omphalomesenteric duct to obliterate by the sixth week
- true diverticulum
- antimesenteric border of the ileum
- 2 feet from the ileocecal valve , 2% incidence, 2:1 male:female ratio, 2 in length, 2 years of age, two types of mucosa

- Bleeding
- intestinal obstruction
- Meckel diverticulitis

- Meckel scan
- tagged red blood cell scan
- Contrast studies
- CT and sonography are typically of little value

Resection

ENTERIC FISTULAS.

- anatomy, output, and etiology.

- Abdominal operations
- Diverticular disease
- CD
- Malignant
- Radiation enteritis
- Trauma

- CT with oral and IV contrast
- Fistulography
- Oral contrast studies
- Endoscopy

- FRIENDS : Foreign body, Radiation, Inflammation or Infection, Epithelialization, Neoplasm or lack of Nutrition, Distal obstruction, and/or Steroids (immunosuppression)

- Fluid resuscitation and electrolyte correction.
- Sepsis control
- Nutritional support.
- Decrease of fistula output.
- Skin protection.

- Operative treatment

SHORT-BOWEL SYNDROME.

NEOPLASMS.