



COMMENTS

ISSUE: should duodenal injury routinely be approached w/ more "conservative" surgical technique if associated (adjacent) pancreatic injury exists

ISSUE: optimal method of providing duodenal decompression?

- direct tube duodenostomy
- retrograde via jejunostomy (along w/ feeding tube distally)
- naso-duodenal tube.

ISSUE: Modified duodenal diverticulization vrs. Roux-Y jejunal augmentation for decreasing duodenal fistulae in tenuous suture line repairs.

ISSUE: optimal method for augmented duodenal closure?

- Finney or Jaboulay pyloroplasty
- Loop jejuno-duodenostomy
- Roux-Y jejuno-duodenostomy
- Isolated jejunal pedical patch

Re-implantation may be considered for Isolated ampullary (Oddi) avulsion without extensive duodenal injury. Minor papillary (Santorini) avulsions can usually be ligated.

MANAGEMENT ALGORITHM FOR DUODENAL INJURIES