

Infectious Disease associated with ABD surgery and Cholecystitis

1. What are common prophylactic ABx therapies associated with abdominal issues?
2. What are the most common abdominal pathogens for different disease processes like cholecystitis, appendicitis, etc?
3. What is the most common causes of abdominal pain you see coming through the ER?
4. Coming through the clinic? Is there a difference?
5. How do you manage sepsis associated infections?
6. What are the appropriate amount false negative rates associated with gallbladder and appendix surgery?
7. How do you recommend counseling a patient with vague abdominal pain and no appropriate diagnosis?
8. When is exploratory laparoscopy appropriate?
9. How is C-Diff related prevented and illness managed? Are probiotics or fecal transplant appropriate?
10. How are superbugs or antibiotic resistant bacteria managed? VRE? Gonorrhea? MRSA?
11. What are you most commonly used empiric therapies or below the diaphragm and above the diaphragm surgeries?
12. What is the strangest thing you have ever come across in an abdominal surgery?
13. What is the mechanism of appendicitis? How does it happen?
14. Do you have any ideas about what the appendix is/was used for in our bodies?
15. What is your favorite surgery and why?
16. How does one prevent gallstones from forming? Is sludge prevented the same way?