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Complete Supine
Percutaneous
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STEP by STEP

technique ~~Supine~~
~~PCNL \u0026amp; ECIRS~~
~~Basics by~~

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PCNL (ECIRS) in
small kidney with

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CRF and multiple stones 7 tips to Beginners in Percutaneous surgery in the supine position PCNL - Supine percutaneous nephrolithotomy in a tetraparetic patient with skeletal deformity Supine PCNL for Large Pelvic stone -

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Basics Explained

Supine PCNL
(Percutaneous
Nephrolithotomy)

2018 SIU live
(ultrasono-guided
supine mini-

PCNL/ECIRS),
supine puncture

Supine PCNL in
Partial Staghorn

Calculus Supine

PCNL Standardised

technique in 4

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steps TUBELESS
PERCUTANEOUS
NEPHROLITHOTOM
Y (PCNL) IN SUPINE
POSITION Mini
Invasive Treatment
in Supine PCNL ||
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Renal Access in
PCNL at PERCON
2018 by Dr S K Pal
Triangulation
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~~ANIMATION—IMP~~

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~~techniques step by~~

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Fluoroscopy
Triangulation
Technique

PCNL SUPINE
STONE SURGERY

DR VIKAS
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PCNL:
What is a
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Endoscopically
Assisted Access for
a PCNL Best way to
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Thoracic Spine

Bilateral Supine

PCNL SUPINE PCNL

FOR LARGE MATRIX

STONE Supine

PCNL Puncture

Bidirectional

ECIRS/supine PCNL

+ RIRS video guide

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Percutaneous

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(PCNL) Tailored Nephrolithotomy
and Miniaturised
ECIRS Guest:
Vineet Gauhar

ECIRS Post PCNL
Staghorn Calculus
residual stones

Urowebinar: PCNL
approaches: Prone
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~~Percutaneous~~
~~Nephrolithotomy~~
~~And Ecirs~~

PNL is the gold

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standard for the management of large and/or otherwise complex renal stones. Since its introduction in the seventies PNL has undergone considerable evolution, mainly driven by the improvement in access techniques, endoscopic

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instrumentation technology, lithotripsy devices and drainage management. The conventional prone position for PNL has been challenged in the last two decades by a variety of modifications, including the supine and

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Galdakao-modified
supine Valdivia
positions ...

And Ecirs The

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Percutaneous

Nephrolithotomy

and ECIRS. First

book dealing with

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Supine PNL. The supine position with its modifications is the basis for ECIRS (Endoscopic Combined Intra-Renal Surgery) This book describes in detail the surgical technique step by step, all the instruments and accessories to be

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employed, the organization of the operating room, the application of this surgical approach to special cases (malignant conditions, malformations, obesity, renal transplant...)

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and ECIRS — The
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New Way of
Interpreting PNL by
Scoffone, Cesare

Marco, Hoznek,

Andr as, Cracco,

Cecilia Maria (ISBN:

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otherwise complex
renal stones. Since
its introduction in
the seventies PNL
has undergone
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The Galdakao-
modified supine
Valdivia position
allowed the
development of
ECIRS (Endoscopic
Combined
IntraRenal
Surgery), a
technique

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exploiting a
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ephrolithotomy
And Ecirs The
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approach to the...

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Percutaneous
nephrolithotomy
(PCNL) was first

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described by Fernström and Johansson in 1976 in prone position (1). Since then, this surgical approach has become the gold standard for treatment of large stones and it has evolved over time resulting in decrease in invasiveness and

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morbidity and
improvements in
ergonomics and
outcomes.

New Way Of

~~Supine~~
~~interpreting Pnl~~

~~percutaneous
nephrolithotomy:
tips and tricks ...~~

Background:
Percutaneous
nephrolithotomy
(PNL) is still the
gold-standard

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treatment for large
and/or complex
renal stones.

Evolution in the
endoscopic
instrumentation
and innovation in
the surgical skills
improved its
success rate and
reduced
perioperative
morbidity. ECIRS
(Endoscopic

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Combined Percutaneous Nephrolithotomy (IntraRenal Surgery) is a new way of affording PNL in a modified supine position, approaching antero-retrogradely to the renal cavities, and exploiting the full array of endourologic equipment.

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~~ECIRS (Endoscopic
Combined
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in the ...~~

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~~Nephrolithotomy N
and ECIRS~~

Objective: This study compared the stone opacity effect in patients who had

radiopaque and radiolucent stones in percutaneous nephrolithotomy (PCNL) results.

Material and methods: The

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medical records of 171 complete supine PCNL procedures were gathered. Patients were categorized into two groups: those with radiopaque (n=141) and those with radiolucent (n=30) stones.

~~Comparison of the~~

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~~outcomes of
complete supine
percutaneous ...~~

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The Galdakao-
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allowed the
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Antegrade and retrograde percutaneous nephrolithotomy approach to the upper urinary tract, using both rigid and flexible endoscopes with the related accessories.

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~~and ECIRS eBook~~

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~~by ...~~ Percutaneous N

ephrolithotomy
Percutaneous
nephrolithotomy is

And Ectrs The
currently one of

the main treatment

options for large

renal stones, but

the effect of

positioning on

comparative

costing has been

scarcely

documented. We

aimed to compare

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the cost effectiveness of modified supine with traditional prone percutaneous nephrolithotomy procedures in the context of Victoria, Australia.

~~Prone versus
modified supine
percutaneous~~

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~~nephrolithotomy~~

The objective of this study is to assess stone clearance and perioperative complication rates of supine percutaneous nephrolithotomy (PCNL). Methods: This was a retrospective, observational study

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of supine PCNL performed in a surgical unit at a district general hospital by two surgeons in the United Kingdom. Data collected included patient ...

~~A retrospective, observational study of supine ...~~

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nephrolithotomy, or PCNL, is a procedure for removing medium-sized or larger renal calculi (kidney stones) from the patient's urinary tract by means of a nephroscope passed into the kidney through a track created in the

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patient's back.
PCNL was first
performed in
Sweden in 1973 as
a less invasive
alternative to open
surgery on the ...

~~Nephrolithotomy,
Percutaneous
procedure,
recovery, test ...~~

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percutaneous

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nephrolithotomy (PCNL) has been described in 1988 and several modifications followed since. Despite claimed benefits, supine PCNL is still neglected by the majority of urologists.

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PNL is the gold standard for the management of large and/or otherwise complex renal stones. Since its introduction in the seventies PNL has undergone considerable evolution, mainly driven by the improvement in access techniques,

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endoscopic
instrument
technology,
lithotripsy devices
and drainage
management. The
conventional prone
position for PNL
has been
challenged in the
last two decades
by a variety of
modifications,
including the

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Supine and Galdakao-modified supine Valdivia positions, which make simultaneous retrograde working access to the collecting system possible and have proven anesthesiological advantages. The Galdakao-modified supine Valdivia

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position allowed the development of ECIRS (Endoscopic Combined IntraRenal Surgery), a technique exploiting a combined antegrade and retrograde approach to the upper urinary tract, using both rigid

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and flexible endoscopes with the related accessories. The synergistic teamwork of EGIRS provides a safe and efficient, minimally-invasive procedure for the treatment of all kinds of urolithiasis. The aim of this book is to share with the

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urologic
community
nephrolithotomy
worldwide our
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experience, our
New Way Of
standardization of
all the steps, and
tips and tricks for
interpreting Pnl
the procedure.

This book provides
a comprehensive
overview of
percutaneous
nephrolithotomy,

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covering topics including its history, anatomy, preoperative preparation, clinical operation, and postoperative treatment. It presents both basic and advanced techniques, such as micro-PNL, mini-PNL, ultra-mini-PNL, and super

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mini-PNL, together with representative clinical cases. In addition, the book describes potential technical issues, complications, indications and contraindications in detail, making it a valuable reference guide for urologists, especially those

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who wish to
improve their PCNL
skills in clinical
practice.

New Way Of

Interpreting Pnl

Written entirely by
surgical urologists,

Surgical

Management of
Urolithiasis:

Percutaneous,
Shockwave and

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Percutaneous Nephrolithotomy
presents a comprehensive overview of the past, present, and future of surgical techniques, with a focus on educating urologists on the full spectrum of stone procedures. In addition to the technical issues, detailed

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Complications are described. Basic as well as advanced techniques are presented in both a didactic and visual mode with representative endoscopic images and radiographs. Recent advancements which are not routinely a core

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component of
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programs are also
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in the field of
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essential both for
those currently in
training and for
those already in
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of access,
operative
techniques,
complications, and
postoperative care.

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have been introduced over the past 30 years for the diagnosis, management, and prevention of urinary calculi.

These range from novel imaging procedures and medical expulsive therapy to interventional treatment options.

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The contemporary urologist should be familiar with and adept at

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Urolithiasis and its treatment, both surgical and medical. In addition to providing up-to-date evidence-based

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provide surgeons and urologists/nephrologists with a well-illustrated, full-colour expert guide to performing these complex and difficult surgical procedures safely and effectively. Focus throughout is on percutaneous management of three major

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conditions: large
renal calculi
(percutaneous
nephrolithotomy),
transitional cell
cancer
(percutaneous
resection of tumor)
and renal cell
cancer
(percutaneous
cryotherapy and
radiofrequency
ablation). For each

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of these conditions,
leading surgeons
and urologists will
cover:

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the disease

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