

Supplementary Table: Summary of Tokyo Guidelines 2013 diagnostic criteria, severity assessment, and management pathways for acute cholecystitis.

Diagnostic criteria for acute cholecystitis

Criteria A

- Murphy's sign
- RUQ pain or mass

Criteria B

- Fever
- Elevated WBC
- Elevated CRP

Criteria C

- Imaging findings of acute cholecystitis

Suspected diagnosis (1 item from criteria A and B)

Definite diagnosis (1 item from criteria A, B, and C)

Severity assessment criteria for acute cholecystitis

Grade I (Mild)

- Patient otherwise healthy
- No end-organ dysfunction
- Mild inflammatory changes on imaging

Grade II (Moderate)

- WBC > 18,000/mm³
- Tender RUQ mass
- Symptoms for >72 hours
- Marked local inflammation on imaging

Grade III (Severe)

- End-organ dysfunction
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Management of acute cholecystitis

Grade I

- Initiate antibiotics
- LC within 72 hours of symptom onset

Grade II

- Initiate antibiotics
- LC within 72 hours of symptom onset
- Urgent cholecystectomy or drainage if antibiotic fails

Grade III

- End-organ support
 - Urgent gallbladder drainage
 - Possible elective cholecystectomy after acute illness
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RUQ = right upper quadrant; CRP = C-reactive protein; WBC = white blood cells; LC = laparoscopic cholecystectomy
